





# **Preparing to Enhance Protection** in Disasters Toolkit

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# Acronyms

ADPC Asian Disaster Preparedness Center
BHA Bureau for Humanitarian Assistance

CDAC Communicating with Disaster-Affected Communities

CBO Community-Based Organization

CLDRM+ Community-Led Disaster Risk Management + Protection

CDMC Community Disaster Management Committee

CoC Code of Conduct
CRS Catholic Relief Services
DRR Disaster Risk Reduction

DRRM Disaster Risk Reduction and Management

FGD Focus Group Discussion
GAM Gender-Age Marker
GBV Gender-Based Violence
GPC Global Protection Cluster

HR Human Resources

IASC Inter-Agency Standard Committee

ICT Information and Communication Technology
IEC Information, Education and Communication
INGO International Non-Governmental Organization

IT Information Technology
IVR Interactive Voice Response
KII Key Informant Interview
LGU Local Government Unit

NDRRM National Disaster Risk Reduction and Management

NGO Non-Governmental Organization

OCD Office of Civil Defense
OSM Open Street Map
PFA Psychological First Aid

PrEPD Preparing to Enhance Protection in Disasters

PRG Peer Reference Group

PSEA Protection Against Sexual Exploitation and Abuse

PWD People with Disabilities
SEA Sexual Exploitation and Abuse
SGBV Sexual and Gender-Based Violence

SHAKE Supporting Households and LGUs Awareness and Knowledge for Earthquake Preparedness

SIMEX Simulation Exercise
SMS Short Message Service

SOP Standard Operating Procedures STD Sexually Transmitted Disease

ToR Terms of Reference UN United Nations

UNDRR United Nations Office for Disaster Risk Reduction UNHCR United Nations High Commissioner for Refugees

UDHR Universal Declaration of Human Rights

USA United States of America

USAID United States Agency for International Development

# **Introduction to the Toolkit**

The most recent Annual Report by the Global Protection Cluster (GPC) reported that more than 150 million people were in need of protection assistance due to conflict, violence, epidemics and climate-related disasters. This is 40 million more vulnerable people than were recorded in 2021 and represents, to date, the highest increase in one year.<sup>1</sup>

In November 2019, recognizing that protection concerns were not sufficiently included in preparedness work,<sup>2</sup> DRR actors called upon the GPC to ensure that protection be considered in disaster preparedness and risk reduction. As protection needs continue to increase, many communities across the world remain unprepared to manage the specific protection risks and impacts associated with natural disasters.

Community-based DRR initiatives often include the core principles of participation, inclusion, accountability and leadership. However, the needs and priorities of vulnerable groups are often misunderstood and poorly addressed, which means that DRR and humanitarian organizations do not always design and implement responses that ensure access, dignity and safety for the most marginalized people. Because of this, vulnerable people may be disproportionately affected by disaster *and* by the resulting response.<sup>3</sup> Protection risks present in their communities may threaten their safety or they may face barriers to accessing assistance. Further, they may be unable to safely provide feedback or register complaints when the response is ineffective or inappropriate.

Embedding Safe and Dignified Programming into disaster preparedness and response is key to ensuring that DRR and humanitarian actors can provide appropriate, accessible, safe and sustainable support to people and communities.<sup>3</sup> Also key is linking this work with the localization agenda and focusing on building and supporting national and local capacities whenever possible.

# What is Safe and Dignified Programming?

Safe and Dignified Programming ensures that programs respect the safety, meaningful access and dignity of people and communities.

Within this project, the team adapted CRS' <u>Safe and Dignified Programming Framework</u> and focused on six areas: analysis, community engagement and participation, feedback and complaint mechanisms, information sharing, mapping/referral and staff conduct.

# **Roadmap**

This toolkit includes the following sections:

**Introduction:** An overview of the toolkit including how to use it, the guiding principles underpinning the work and a list of the available tools.

**Part 1:** Tools to support Safe and Dignified Programming in disaster risk reduction and management (DRRM). The tools are designed for DRR and humanitarian actors. They include training materials to increase knowledge and understanding of Safe and Dignified Programming as well as tools to guide DRRM plans at the community level.

**Part 2:** Tools designed for local DRR and humanitarian actors to support shock-responsive local systems. They include guidance on how to set up or adapt feedback mechanisms, referral pathways and Codes of Conduct (CoCs). Part 2 also includes a simulation exercise to test feedback mechanisms.

<sup>&</sup>lt;sup>1</sup> global protection cluster annual report 2021.pdf (globalprotectioncluster.org).

<sup>&</sup>lt;sup>2</sup> IBID.

<sup>&</sup>lt;sup>3</sup> https://emergency.unhcr.org/entry/42554/accountability-to-affected-populations-aap.

**Part 3:** Tools and training materials to raise awareness on rights and entitlements with diverse community members—including materials to support community Safeguarding Agents. The tools are designed for use in communities by local DRR and humanitarian actors.

**Part 4:** Case studies from the project—including lessons learned on embedding Safe and Dignified Programming approaches in preparedness and response work.

Part 5: Glossary of key terms used in the toolkit.

# Background to the project

To address these needs, CRS launched its USAID/BHA-funded PrEPD project in 2021. The 18-month project aimed to deliver a comprehensive toolkit to support local DRR and humanitarian actors to embed Safe and Dignified Programming into their work. To ensure the guidance was grounded in the needs and priorities of local stakeholders, the toolkit was developed and tested in three countries: the Philippines, Sierra Leone and Uganda.

These countries were selected based on their high risk of frequent, rapid-onset disasters—including storms, floods, earthquakes and landslides. All have existing DRR systems and actors but needed to build capacities to fully embed Safe and Dignified Programming.

An in-depth needs assessment was carried out before the project began in order to identify gaps in Safe and Dignified Programming. The assessment found that in all three countries, Safe and Dignified Programming approaches were not consistently used ahead of or during disasters and were often missing from national and local DRR contingency plans. There were also gaps in the knowledge of local humanitarian and DRR actors about Safe and Dignified Programming. Consequently, the needs and priorities of vulnerable groups were often misunderstood and poorly addressed. Community awareness about rights and entitlements was also low. Community-level shock responsive mechanisms—including feedback mechanisms and referral pathways—existed in the countries but were not widely used. The detailed findings of the needs assessment can be found in the case studies section of this toolkit (PART 4).

The results of the detailed assessment helped to frame the project around a few core areas, which evolved over the course of the project to encompass:

- 1. Development of tools for Safe and Dignified Programming with local DRR actors that are appropriate for and accessible to the target audience
- 2. Development of tools to support shock-responsive local systems—including feedback mechanisms and referral pathways
- 3. Development of tools to raise awareness on rights and entitlements with diverse community members
- 4. Case studies to capture learning around successful Safe and Dignified Programming approaches

# Who is this toolkit for?

This toolkit is for local DRR and humanitarian actors to help them embed Safe and Dignified Programming approaches into their work.

#### How to use the toolkit

The PrEPD Toolkit is intentionally designed to offer flexibility in its utilization. The tools provided do not necessitate a specific sequential order for implementation. Instead, their selection and application depend on various factors—including the project's context, duration and the preferences and capacities of the user. While there is no rigid sequence to follow, it is essential to consider multiple criteria when choosing the appropriate tools. For instance, emphasis should be placed on selecting tools that are most pertinent and practical within the given context. Furthermore, these tools should be adaptable to include relevant examples tailored to specific circumstances. Additionally, any actions taken must be coordinated with existing Disaster Risk Reduction (DRR) initiatives to prevent duplication of efforts. Moreover, the selection of tools should be guided by the available resources, capacities and the risk profiles of the communities involved. Whenever feasible, it is advisable to translate the tools into local languages to enhance the engagement of marginalized groups. It is worth noting that some Sessions, Handouts and Training Tools cross reference to each other, and they may contain overlapping content. This redundancy is intentional, allowing each section to function independently if preferred.

# **Guiding principles**

All the tools in the toolkit are based on three guiding principles:

#### Principle 1: Include diverse groups in the community

Diverse groups should be involved with and take the lead on any preparedness or response activities. This means involving different groups from the community who are more vulnerable and traditionally marginalized. This may include women, children, older people, people with disabilities, speakers of marginalized languages, particular ethnic groups, indigenous people, informal settlers or people who are displaced. These groups are often left out of disaster preparedness work, and their needs and preferences are often overlooked or ignored leaving them dangerously vulnerable in a disaster. It is important to include them to make sure everyone in a community is fully prepared for a disaster.

#### Principle 2: Leadership by the community

Local communities should be at the forefront of planning for and managing responses. They know their context best, and they know what hazards and protection risks they face. Building on this in-depth knowledge is critical to ensure that DRR work is appropriate, relevant and sustainable.

# Principle 3: Accountability by all involved

Accountability means using power responsibly and in a way that is transparent to everyone, especially those who are affected by how that power is wielded. Effective DRR approaches should always be based on mutual accountability.

# Developing the tools in a participatory and inclusive way

The tools in this toolkit were developed in a participatory way. They were adapted and refined in response to feedback from country teams, partner organizations and community groups. An example is the <a href="Community-Led Disaster Risk Management + Protection (CLDRM+) Tool">CLDRM+) Tool</a>, which went through the following steps:

- 1. As part of the global PrEPD project, CRS forged a working group of project leads from the three implementing countries and three global Technical Advisors. The group met online regularly throughout 2022 to review the different tools—including the CLDRM+ Facilitation Guide.
- 2. Because the project in the Philippines was implemented in coordination with another DRR-focused project—Supporting Households and LGUs Awareness and Knowledge for Earthquake Preparedness (SHAKE)—the project team decided to test the tool during activities that were already planned, which included community-based DRRM planning sessions in ten targeted barangays (districts).
- 3. CRS introduced staff from partners, including Caritas Pasig Inc. (CPI) and the Diocese of Malolos Commission on Social Action (MDSAC), to the CLDRM+ Facilitation Guide in a weeklong face-to-face workshop. The training included presentations on DRR and Safe and Dignified Programming as well as simulation exercises. The aim was to give partner staff the knowledge and confidence to co-facilitate the sessions.
- 4. CRS and partners tested the adapted CLDRM+ Facilitation Guide with 360 participants (including 247 women) over a 2-month period. Participants included barangay and city DRRM committee members, community Safeguarding Agents (selected as part of the project) and DRRM Ambassadors. Representatives of diverse groups from the community were also invited—including older people, people with disabilities and single heads of households.
- 5. Project staff documented learning from the sessions in each of the ten barangays—including direct feedback from participants.
- 6. The CLDRM+ Facilitation Guide was updated based on the observations and feedback from the local partners organizations and community representatives.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

# **List of Tools**

NUMBER OF TOOL	NAME OF TOOL	PURPOSE	COMPRISES
PART 1: To audience	ools for Safe and Dignified Program	nming that are appropriate for and accessible to	the target
	Introduction to the tools for Safe and Dignified Programming		Overview, Lessons Learned
<u>1.1</u>	Safe and Dignified Program Foundations Training	To build foundational knowledge of local DRR and humanitarian actors on Safe and Dignified Programming	Training Facilitation Guide, PowerPoint, Handouts
1.2	Safe and Dignified Programming Training Package	To increase the knowledge and capacity of local DRR and humanitarian actors on Safe and Dignified Programming	Training Facilitation Guide, PowerPoint, Handouts
<u>1.3</u>	Community-Led Disaster Risk Management + Protection Facilitation Guide (CLDRM+)	To ensure diverse groups from communities are involved with and lead the DRR planning process	Facilitation Guide
PART 2: To	ools for shock responsive systems		
	Introduction to tools to support shock-responsive protection and accountability systems		Overview, Lessons Learned
2.1	Context Analysis and Consultation Tool for Feedback Mechanisms	To help local DRR and humanitarian actors choose the best shock-resistant feedback mechanisms	Three-Step Tool
2.2	Feedback Mechanisms Standard Operating Procedures (SOPs)	To help local DRR and humanitarian actors set up shock-responsive feedback mechanisms	Adaptable Tool
2.3	Developing a Referral Pathway for Essential Protection Services	To help local DRR and humanitarian actors map protection services and develop referral pathways	Six-Step Tool
2.4	Code of Conduct Tools	To help local DRR and humanitarian actors develop or adapt a Code of Conduct	Set of Four Tools
2.5	Simulation Exercise Facilitation Pack	To test current feedback mechanisms and develop an improvement plan	Simulation Exercise Facilitation Guide, Handouts, Score Card
PART 3: To	ools to raise awareness on rights a	nd entitlements of diverse community members	
	Introduction to tools to raise awareness on rights and entitlements within communities		Overview, Lessons Learned

NUMBER OF TOOL	NAME OF TOOL	PURPOSE	COMPRISES
3.1	Awareness Session on Rights and Entitlements Facilitation Pack	To increase the knowledge and capacity of local communities on their rights and entitlements	Training Facilitation Guide, PowerPoint, Handouts
3.2	Safeguarding Agent Terms of Reference (ToR)	To help local DRR and humanitarian actors identify and select community Safeguarding Agents	Tool Outlining the Roles and Responsibilities of Community Safeguarding Agents
3.3	Safeguarding Agent Facilitation Pack	To increase the knowledge and capacity of community Safeguarding Agents	Training Facilitation Guide, PowerPoint, Handouts
PART 4: Le	essons learned and emerging best	practices	
4.1	Needs Assessment	To share lessons learned about common gaps in Safe and Dignified Programming in contexts vulnerable to natural disasters	
<u>4.2</u>	Sierra Leone	To share lessons learned about embedding Safe and Dignified Programming	
4.3	Sierra Leone	To share lessons learned about mapping services and developing referral pathways	
4.4	Philippines	To share lessons learned about how to embed Safe and Dignified Programing in the CLDRM+ process	
4.5	Philippines	To share lessons learned about developing local codes of conduct	
4.6	Uganda	To share lessons learned about setting up and improving feedback mechanisms	
PART 5: G	PART 5: Glossary		

# PART 1: TOOLS FOR SAFE AND DIGNIFIED PROGRAMMING

# **Summary**

**Part 1** includes tools to support Safe and Dignified Programming in disaster risk reduction and management (DRRM). The tools are designed for DRR and humanitarian actors. They include training materials to increase knowledge and understanding of Safe and Dignified Programming as well as tools to guide DRRM plans at the community level.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

# List of the Tools

NUMBER OF TOOL	NAME OF TOOL	PURPOSE	COMPRISES
PART 1: Tools for Safe and Dignified Programming that are appropriate for and accessible to the target audience			the target
	Introduction to the tools for Safe and Dignified Programming		Overview, Lessons Learned
1.1	Safe and Dignified Program Foundations Training	To build foundational knowledge of local DRR and humanitarian actors on Safe and Dignified Programming	Training Facilitation Guide, PowerPoint, Handouts
1.2	Safe and Dignified Programming Training Package	To increase the knowledge and capacity of local DRR and humanitarian actors on Safe and Dignified Programming	Training Facilitation Guide, PowerPoint, Handouts
1.3	Community-Led Disaster Risk Management + Protection Facilitation Guide (CLDRM+)	To ensure diverse groups from communities are involved with and lead the DRR planning process	Facilitation Guide

# Part 1: 1.1 Safe and Dignified Program Foundations Training Pack

# Purpose:

The aim of this training is to create an accessible, low-tech session to help disaster risk reduction (DRR) actors answer these questions:

- What are the basic elements of human rights?
- Who or what is responsible for threats?
- Who is vulnerable to them and why?
- What are the concepts and importance of safety and dignity?

# Participants:

This training is for community disaster planners and officers—including village-level disaster risk reduction and management (DRRM) planners, coordinators, officers of home-owners associations, community emergency responders, civil society actors, protection actors, representatives of women's groups, representatives of people with disabilities (PWD) associations and members of community-based organizations (CBOs) performing DRR needs assessments at the community level.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

### Time:

■ 250 minutes

# Handouts (HOs):

- HO 1: Universal Declaration of Human Rights
- HO 2: Definitions

# Training Tools (TTs):

- <u>TT 1:</u> Power Walk Characters
- <u>TT 2:</u> Protection Risks Role-Playing Scenarios
- TT 3: Vulnerabilities and Capacities Cards

# Materials:

- Flip chart and markers
- Sticky notes
- Pens and paper

#### Session outline:

- Welcome and Introduction
- Section 1: Understanding Human Rights
- Section 2: Understanding Threats
- Section 3: Understanding Vulnerabilities and Capacities
- Session 4: Understanding Safety and Dignity
- Wrap-up

# Introduction

#### Time:

■ 30 minutes

# Materials:

Flip chart and markers

INTRODUCTION, 10 MINUTES		
Presentation	WELCOME everyone to the workshop.	
	<b>INTRODUCE</b> an icebreaker to help the trainer and participants get to know each other. Use an activity that makes everyone in the room feel equal, regardless of role or status. This will encourage open discussion.	
<b>EXPLAIN</b> the purpose and agenda for the day.		
	<b>EXPLAIN</b> that the aim of this training is to support community disaster planners and officers to better serve people affected by disasters. They will be the champions of this work. To be as prepared as possible, everyone must feel empowered to understand and explain the concepts.	
	<b>EXPLAIN</b> that this training is an introduction to Safe and Dignified Programming. The aim is to help participants understand the concepts and approaches.	
Exercise	Icebreakers are for trainer(s) and participants to get to know each other. Use an activity that makes everyone in the room feel equal, regardless of role or status. This can encourage open discussion.	

# **CREATING A SAFE SPACE, 10 MINUTES**

#### **Exercise**

#### **Purpose**

Help participants understand and agree to ground rules to create a safe space and understand why this is important

# **Process**

**EXPLAIN** that there is flip chart on the wall for comments or questions. It can include positive and negative comments. This is to encourage feedback and model why being open to feedback is important for learning and for accountability to the people with whom we work.

**EXPLAIN** that because this training is happening in a group setting and covers sensitive topics, it is important to set ground rules so everyone feels safe and respected.

**ASK** how we can make this space feel safe. **WRITE** the ideas on a flip chart and ensure everyone agrees on these ground rules. **STICK** the list onto a place where everyone can easily see it. Be sure to include the following:

- Treat others with dignity, even if we disagree. Respect the opinions of others.
- Be open to new ideas.
- Ask questions and be curious.
- Listen to one another and speak one at a time. This will probably prompt lots of comments and conversation. The goal is for everyone to hear other people's comments and learn from them.
- Respect confidentiality. Everything people say during these conversations should stay in the room unless there is a safety issue or someone feels uncomfortable.
- Be open and honest.
- No one should feel forced to join in. Participants can refuse or withdraw from activities without consequences.

# **Session 1: Understanding Human Rights**

#### Time:

■ 40 minutes

# Objective:

Participants understand the basic elements of human rights

# Key Messages:

- The basic elements of human rights include life, justice, freedom and equality.
- Everyone has human rights, but not everyone is actually able to enjoy/access these rights depending on who is most vulnerable and who has more power.
- We must see for ourselves why rights are so important. This helps us develop a sense of responsibility.<sup>4</sup>

#### Materials:

- Flip chart and markers
- Sticky notes and pens

# Handout:

■ HO 1: Universal Declaration of Human Rights

# **Training Tool:**

■ TT 1: Power Walk Characters

### Preparation:

Adapt the Power Walk Characters to the context

# 1.1 HUMAN RIGHTS – WHAT ARE THEY? 15 MINUTES

#### **Exercise**

#### **Purpose**

Introduce the concept of human rights and what they mean

#### **Process**

# Part A

**WRITE** the words "HUMAN RIGHTS" at the top of the flip chart. Below the words, draw a large circle or the outline of a human being.

**ASK** participants to brainstorm what qualities define a human being and write the words on sticky notes (they will be moved later). For example, "intelligence," "kindness" or "sympathy." **STICK** these *inside* the circle/outline.

**ASK** participants what they think is needed to protect and fully develop these qualities in a human being. For example, "education," "friendship" or "loving family." **STICK** their answers *outside* the circle/outline.

**EXPLAIN** that everything *inside* the circle/outline *relates* to human dignity, to the wholeness of being human. The things written *outside* the circle/outline are *necessary* to human dignity. Human rights are based on these necessities.

**EXPLAIN** that the Universal Declaration of Human Rights (UDHR) sets the standard for how human beings should behave toward one another so that everyone's human dignity is respected. Read the following sentence:

<sup>&</sup>lt;sup>4</sup> <u>Teaching Human Rights- Practical Activities for Primary and Secondary Schools</u>, Office of the United Nations High Commissioner for Human Rights (UN OHCHR).

"The recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of the freedom, justice and peace in the world"

GIVE each participant a copy of the UDHR (HO 1).

#### Part B

**REVIEW** the list of qualities that define a human as created by the group in Part A.

**WRITE** the words "SURVIVAL," "HUMAN DIGNITY" and "LUXURY" on another flip chart page or blackboard. Discuss what these terms mean.

Place each item listed in Part A (things that are necessary to fully develop human qualities) under one of these headings. For example, is education necessary to survival? Is it necessary to human dignity? Or is education a luxury?

**DISCUSS** the answers with the group using the following questions:

- Should human rights protect only what a human being needs to survive? Why or why not?
- Should human rights also protect things you classified as "luxuries"? Why or why not?
- What happens when a person or government tries to take away something that is necessary to human dignity?
- Have participants ever been in a situation where they were not respected or treated ethically? How did that feel?
- How would participants feel if they lost their homes or livelihoods in a flood? How would they want to be treated?

**EXPLAIN** that humans are more than our survival needs. Having more than just our survival needs met allows us to live full lives in dignity (the right of a person to be valued or respected and to be treated ethically).

#### **Debrief**

Rights belong to everyone and cannot be taken away.

# 1.2 WHO HAS POWER? POWER WALK, 25 MINUTES

#### **Exercise**

#### **Purpose**

To show that not everyone has access to their human rights.5

#### **Process**

**ASK** participants to stand in a row across one side of the room, facing the facilitator.

**Distribute** the *Power Walk Character Preparation Cards* (TT 1) to the participants. Tell them not to share who their character is.

**ASK** them to pretend to be that character and to form a picture of who they are and what their life is like. They must then think about how their characters would reply to a list of questions that will be read aloud.

**ASK** them to listen to the questions and to take one step forward if their answer to a question is "yes," and to stay where they are if their answer is "no."

**READ** each of the following questions aloud and give participants enough time to decide whether to take a step:

- Did you have enough to eat today?
- Do you have cash in your pocket?
- Do you have a valid, government-issued ID?
- Do you have access to a telephone?
- When you are sick, can you see a doctor and pay (if necessary) for their services?

<sup>&</sup>lt;sup>5</sup> This exercise was adapted from Church World Service (CWS), (2009). Putting Safety and Dignity First.

- Do you travel freely in your country of residence?
- If you were robbed, would you go to the police to report the crime?
- Did you finish primary school?
- Does your family respect your opinions and ideas?
- Can you read the newspaper?
- Did you have access to clean water today?
- Did you have access to a latrine or toilet today?

**ASK** the participants to reveal their identities and to explain why they stepped forward or not in response to particular questions. The following guiding questions may be helpful:

- What did you assume about your character, regarding age, gender and ethnicity?
- Who are the most vulnerable members in your community?
- Who are the most powerful?
- How can limited access to resources expose people to threats and insecurity?
- If there is a natural disaster, who will it affect the most?
- Imagine it is your job to help after a natural disaster. Which groups will need special attention?

#### **Debrief**

In plenary, **HIGHLIGHT** that:

- Those with more power and better access to their rights were closer to the trainer, and those who were more vulnerable were further back in the room.
- We are all born equal and with human rights. However, we do not all have access to those rights. This can be because of social, economic, political, ethnic or religious factors. These rights can be deliberately denied or abused, putting people's safety and dignity at risk.
- People in positions of power are more likely to have the resources and support they need to make sure their rights are respected. The most vulnerable may have fewer opportunities to claim their rights and may become invisible if humanitarian actors do not make a deliberate effort to find and listen to them.

# Session 2: People Need to Feel Valued: Understanding Threats

#### Time:

■ 100 minutes

# **Objectives:**

- Participants understand the concepts of violence, coercion, discrimination and deliberate deprivation
- Participants understand who has power in their community and how this influences how people are affected by a natural disaster

# Key Messages:

- We need to consider what threats are present where we are working and how they affect individual and community safety, dignity and access to assistance.
- Human rights underpin our work. However, in a natural disaster, human rights can be threatened by humangenerated threats of violence, coercion, discrimination and deliberate deprivation.

#### Materials:

- Flip chart and markers
- Sticky notes and pens

# **Training Tool:**

■ TT 2: Protection Risks Role-Playing Scenarios

# **Preparation:**

- Create four flip charts, one for each human-made threat, and stick them on the wall.
- Print out the Protection Risk Role-Playing Scenarios.

# 2.1 WHAT DO WE MEAN BY THREATS? 30 MINUTES FOR PART A; 45 MINUTES FOR PART B

#### **Exercise**

# **Purpose**

Understand what the concepts of violence, coercion, deliberate deprivation and discrimination mean

#### **Process**

# Part A

**EXPLAIN** that in natural disaster and conflict situations, we focus specifically on how four human-generated threats (violence, coercion, deliberate deprivation and discrimination) affect a person's access to their rights.

**STICK** the words "VIOLENCE," "COERCION," "DELIBERATE DEPRIVATION" and "DISCRIMINATION" onto a wall where they are clearly visible.

**DIVIDE** participants into four groups and give each group a card with one of the threats written on it. **ASK** them to write on a sheet of the flipchart:

- A definition for each word
- Examples from their own contexts or work

**STICK** the flipcharts on the wall and encourage groups to review with each other.

**EXPLAIN** the definitions of each of the four threats in plenary:

■ **Violence** is behavior that aims to harm someone. Violence can come in different forms—such as physical, sexual, psychological or even structural. Examples include deliberate killing, wounding, sexual violence, torture or creating fear of any of these.

- **Coercion/exploitation** is making someone do something against their will by using force or threats. Examples include forced labor, forced displacement, sexual exploitation or forced recruitment.
- **Deliberate deprivation** normally happens when a person with more power denies materials or other resources (such as information) to a more vulnerable person. Examples include blocking the delivery of humanitarian assistance, refusing to provide identification (ID) documents to individuals or groups, illegal taxes and preventing access to services—such as health, education, markets or the justice system.
- **Discrimination** is treating different categories of people unfairly or with prejudice, especially due to race, age or sex. Examples include stopping certain groups from receiving assistance, limiting their access to jobs and services (such as education or healthcare) and not allowing them to occupy and work the land.

**EXPLAIN** that these four threats affect a person's ability to access their most fundamental rights. In other words, if there is violence, coercion, discrimination or deprivation, a person's rights are probably not being respected.

#### Part B

**ASK** two participants to act out a script from the *Protection Risk Role Playing Scenarios* (TT 2) before using the following questions to guide a discussion.

### Ask the survivor:

- How did you feel in the scenario?
- Why did you feel that way?

#### Ask those watching:

- What did you observe?
- How did you feel while you were watching this scenario?
- Is there anything wrong with this, in your opinion? If so, why?

#### Ask all participants:

- What kind of protection threat do you think this is? (Relate back to the four human-made threats.)
- What could have been done to prevent this? (Ask this question if there is time.)

#### **Debrief**

- There are four main threats that affect a person's rights. If there is violence, coercion, discrimination or deprivation, a person's rights are not being respected, and a person can face serious harm. This can also affect their access to assistance.
- We need to consider what threats are present where we are working and how these threats affect individual and community safety, dignity and access to assistance.

# 2.2 WHO OR WHAT IS RESPONSIBLE FOR THREATS? (PERSONS AND THINGS), 25 MINUTES

#### **Exercise**

#### **Purpose**

Reflect on how people use power in their relationships and how to promote fairer relationships and power-sharing in communities

### **Process**

# Part A

**EXPLAIN** to the group that this activity focuses on the role of power in our relationships with others: how it influences the ways we treat others and how it affects individuals and relationships.

**EXPLAIN** that the group will do an exercise to understand what it means to have "power over" another person and to think about how they use their power over others in their daily lives.

ASK the participants to divide into two equal groups:

- Participants in Group 1 will be "things."
- Participants in Group 2 will be "persons."

**READ** the following directions to the group:

- Participants who are things: You cannot think, feel or make decisions. You must do what the "persons" tell you. If you want to move or do something, you must ask the person for permission.
- Participants who are persons: You can think, feel and make decisions. You can also tell the "things" what to do.

**ASK** each "person" to pair up with a "thing." All participants should now be in pairs. If there is an unequal number of participants, one group can have three participants.

**EXPLAIN** that on the count of three, "persons" can tell the "things" what to do. For example: Jump up and down, spin around, sit on the ground, etc.

Count down "three, two, one, GO."

After 2 minutes **ASK** the pairs to reverse roles: "persons" will become "things," and "things" will become "persons." The new "persons" now have 2 minutes to tell the "things" what to do.

Count down "three, two, one, GO."

After 2 minutes, **ASK** the participants to return to their tables and discuss the questions below:

- What is this activity about?
- When you were "things," how did it feel to be treated like a thing?
- When you were "persons," how did it feel to treat someone like an object?
- Why do people treat others like "things"?
- Who has power in our culture?
- In what ways do they use their power over others?
- How can a natural disaster affect this power dynamic? Would those with power have more or less power than before? How about those without power?

#### **Debrief**

- There can be power imbalances in relationships that can lead one person to treat another like an object. They can also reduce a person's ability to make decisions about their body and their life.
- After a disaster, power imbalances can create situations of exploitation and abuse. Individuals who do not have power are vulnerable. They are dependent on others to meet their basic needs. Imagine what this feels like. Imagine the psychological impact and stress it can create. Making deliberate efforts to include vulnerable groups in making decisions helps reduce power imbalances in homes and communities.
- As community leaders and individuals involved in disaster response, we have power. We control resources and access to services. It is important to recognize that power as we do this work so that we do not accidentally abuse it.

# **Session 3: Understanding Vulnerabilities**

#### Time:

■ 50 minutes

# **Objectives:**

- Participants understand the concepts of sex, gender, age and diversity
- Participants understand who is vulnerable to threats in their local context and why

# **Key Messages:**

- Different factors can affect the risks a person faces as well as their vulnerabilities and capacities.
- It is important to understand how the overlapping vulnerabilities of a person's sex/gender, age and other diversity factors can shape and affect the risks they face in a natural disaster.

# **Training Tools:**

■ TT3: Vulnerability and Capacity Cards

# Preparation:

■ Prepare the Vulnerability and Capacities Cards. Cut up a set of ten white Vulnerability Cards for each group. Do the same with the ten grey cards.

#### 3.1 WHO IS VULNERABLE TO THREATS? (SEX/GENDER AND AGE), 10 MINUTES

#### Presentation

#### **Purpose**

Understand who is vulnerable to threats in the local context, focusing on how sex/gender and age can affect this

# **Process**

**ASK** participants to identify vulnerable people/groups in their community and to explain why they are vulnerable.

**EXPLAIN** that a person's sex and the socially prescribed differences between females and males ("gender") are fundamentally important factors in emergencies because they shape people's experiences of natural disasters and armed conflicts.

EMPHASIZE that women and men will:

- Face different risks
- Have different capacities and roles; women may be the primary caregivers, while men may be the primary breadwinners
- Respond in different ways

**ASK** participants to think of examples of how women and men have different experiences during emergencies.

**EXPLAIN** that these factors often cause women and men to have significantly different experiences with getting life-saving help. Emergencies create, reinforce and worsen existing vulnerabilities. Consequently, women are often affected more because of historic inequalities.

**EMPHASIZE** that understanding who has power, and therefore who controls access to resources, helps us understand the different needs that men and women have when they are affected by a disaster. For this reason, considering sex in analysis means disaggregating data by sex and also analyzing all other dynamics.

**ASK** participants to think of an example of how age might affect vulnerability.

**EXPLAIN** that if we look at the example of female community members, when we look at their potential life cycle, we can see clearly that their roles, needs and protection risks change with age and over time.

**GIVE** the example of a young girl whose experiences will be very different than those of an older woman. Please note that it is also important to consider the protection risks that males experience throughout their life cycle.

**EMPHASIZE** that age is therefore also a fundamentally important factor we need to consider. This means collecting data disaggregated by sex *and* age, and then analyzing it so that we can understand the needs, vulnerabilities and capacities of men, women, boys and girls.

#### **Debrief**

- The risks we face, but also the strengths and capacities we have, change throughout our lives. Programs need to consider these elements.
- Age should be considered alongside sex (gender) and other diversity elements as people can experience different and overlapping factors of vulnerabilities that increase the risks they face.

# 3.2 WHO IS VULNERABLE TO THREATS? (DIVERSITY), 10 MINUTES

#### Presentation

#### **Purpose**

Understand who is vulnerable to threats in the local context, focusing on how other diversity factors can affect this

#### **Process**

**EXPLAIN** that so far we have looked at how sex and age are just two facets of a person. While age and gender are important factors for everyone, other characteristics vary from person to person. Humanitarian and DRR actors must recognize, understand and value differences in each emergency to protect the safety and dignity of all affected people. There are also other factors that determine vulnerability, needs and capacities.

**ASK** participants what they think of when they hear the term diversity and to give some examples of different factors of diversity—such as political beliefs or economic status.

**EXPLAIN** that diversity refers to different values, attitudes, cultural perspectives, beliefs, ethnic backgrounds, nationalities, sexual orientations, gender identities, abilities, health, social status, skills and other personal characteristics.

- **Disability**: How a person's physical abilities interact with attitudes and environmental factors to prevent equal participation in life roles and routines.
- **Economic**: What skills and assets do people have? How do these skills and assets help them to cope in an emergency?
- **Political**: People can be part of (or excluded from) formal political processes, but they can also have more (or no) informal influence and power.
- **Social/cultural**: The set of factors that determine a person's or a group's standing—such as ethnicity, religion, being part of a minority group, class, etc.
- **Context**: According to the context, there can be other elements of diversity.

**EXPLAIN** that as actors in an emergency, we need to recognize that the power dynamics in and between these groups will decide who controls resources and what limits they face. Who we talk to will affect which issues are raised because each group will have very different concerns and perspectives.

#### **Debrief**

"Diversity" vulnerability factors acknowledge that situations are very different from one context to another and that some differences (ethnic, religious, physical or mental capacities, social or cultural norms) can lead to complicated power dynamics and protection risks.

# 3.3 VULNERABILITY RANKING, 30 MINUTES

# **Exercise**

#### **Purpose**

Highlight that there can be many vulnerability factors (based on sex, age and other diversity factors) that overlap and can change after a disaster<sup>6</sup>

#### **Process**

**DIVIDE** participants into groups of 3–5 people. **GIVE** each group a set of the 10 white *Vulnerability Cards* (TT 3).

**ASK** the group to rank the individuals according to how vulnerable they think they are. They should consider sex, age and other diversity factors. Have participants rank them from 1 (most vulnerable) to 10 (least vulnerable).

In plenary, ASK:

- What factors make people more vulnerable?
- Why have you ranked the cards in that order?

**REFER** back to sex, age and other diversity factors; for example, "You chose the baby because of her age.". This part of the exercise shows participants how we perceive an individual's vulnerability, and how we base this on sex, age and other diversity factors. These perceptions affect who might be selected for humanitarian assistance.

Once that is complete, **GIVE** each group the corresponding gray set of cards, Vulnerability Cards (<u>TT 3</u>), which give them extra information for each character.

**ASK** the group to read the additional information and discuss whether they now want to change their rankings. This part of the exercise shows how an individual's capacities affect their vulnerability.

In plenary, ASK:

- Why do we have to be careful about making assumptions about vulnerability?
- How can you judge whether an individual or group is vulnerable in a context?
- How does a natural disaster affect a person's vulnerability? Can a natural disaster change who is vulnerable?

#### **Debrief**

- Vulnerability is not a given. Staff should not make assumptions about who is vulnerable and in need.
- Vulnerability is shaped by several factors that overlap—including sex, age and other diversity factors (such as ethnicity, nationality, political affiliation, etc.)
- It is important to consider people's capacities.
- To identify and select those most in need, it is important to analyze who experiences a combination of overlapping vulnerabilities and who may not have the capacity to cope with risks.

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<sup>&</sup>lt;sup>6</sup> From Oxfam. (2009). *Improving the Safety of Civilians: A Protection Training Pack*.

# Session 4: Understanding Safety, Access and Dignity

## Time:

20 minutes

# Objective:

Participants understand the concepts of safety, dignity and access and how they relate to their context

# Key Message:

Emergency responses should focus on how programs can improve safety, dignity and meaningful access for all groups affected by crisis—especially the most vulnerable.

# Materials:

Flip chart and markers

# 4.1 DEFINING SAFETY, ACCESS AND DIGNITY, 20 MINUTES

#### **Exercise**

#### **Purpose**

- Understand the three key concepts of Safe and Dignified Programming (protection mainstreaming): safety, dignity and meaningful access
- Know how to use the concepts appropriately in context

#### **Process**

**EXPLAIN** that safety, dignity and meaningful access are the three key concepts that guide and support all Safe and Dignified Programming.

**DIVIDE** participants into three groups.

**WRITE** "SAFETY," "DIGNITY" and "MEANINGFUL ACCESS" on separate sheets of flip chart paper and give one to each of the groups.

**ASK** participants to write down other words or phrases that explain the word on their paper. Give each team 5 minutes and then ask them to rotate around the room to the next word. After another 5 minutes, ask them to rotate to the final word.

**ASK** them to return to the concept they started with and read the notes that other groups have added.

In plenary, **DISCUSS** the examples below:

- Safety: Being free from danger or risk
  - Keeping program participants safe means understanding the types of violence, coercion, deliberate deprivation and discrimination they could face, and planning how to prevent or reduce these. (Note that safety here does not cover staff security.)
- Dignity: Feeling worthy of honor or respect
  - Being safe is not enough if people do not have their dignity. An individual's inner
    experience is as important as their outward physical needs. People need to feel valued
    in order to have a sense of self-respect, personal identity and autonomy. Respect for
    these things can help carry people through extreme physical suffering.
- Meaningful access: The right or opportunity to use and benefit from something
  - Access is defined as "the right or opportunity to make use of resources," but people
    also need control and the power to decide how a resource is used. Although many
    people will access humanitarian support, this does not necessarily mean that the
    support is reaching those most in need. Equally, those who are most in need might not
    be able to control how resources are used. There are many barriers that can prevent
    people from using and controlling assistance.

**GIVE** each participant a copy of the definitions used through the training ( $\underline{\text{HO 2}}$ ) to read on their own time.

#### Debrief

- "Safety," "dignity" and "access" are key to understanding Safe and Dignified Programming approaches.
- Practical implications can change depending on the context, so it is important to clarify what these words mean and how they are defined.

# 4.2 WRAP-UP, 20 MINUTES

As a wrap-up, **ASK** participants to turn to their neighbor and tell each other:

- One thing they have learned during this training
- One thing they will do as a result of this training

In plenary, finish the session with any key messages from the training, including:

- Everyone has human rights, but not everyone is actually able to enjoy/access these rights depending on who is most vulnerable and who has more power.
- Different factors can affect the risks a person faces as well as their vulnerabilities and capacities.
- Emergency responses should focus on how programs can improve safety, dignity and meaningful access for all groups affected by crisis—especially the most vulnerable.

**THANK** participants for their engagement and participation during the workshop, and make sure they are clear about any follow up and support available.

# **Handouts and Training Tools**

# HO 1: Summary of the Universal Declaration of Human Rights

#### HANDOUT 1. SUMMARY OF THE UNIVERSAL DECLARATION OF HUMAN RIGHTS

This is a simplified version of the full text of the Declaration from the International Rescue Committee. *Protection Mainstreaming Training Facilitator's Guide*, 2013.

- 1. Everyone is born free and has dignity because they are human.
- 2. Everyone has equal rights regardless of the differences between them—such as gender, race, religion, language, wealth or political opinion.
- 3. Everyone has the right to life and the right to live in freedom and safety.
- 4. No one shall be held in slavery.
- 5. Everyone has the right not to be hurt, tortured or treated cruelly.
- 6. Everyone has the right to be treated as a person under the law everywhere.
- 7. The law is the same for everyone and should protect everyone equally.
- 8. Everyone has the right to ask for legal help when their basic rights are not respected.
- 9. No one should be arrested, imprisoned or expelled from their country without good reason.
- 10. Everyone has the right to a fair trial if accused of a crime.
- 11. Everyone has the right to be presumed innocent until proven guilty if accused of a crime.
- 12. Everyone has the right to privacy.
- 13. Everyone has the right to travel within and outside their own country.
- 14. Everyone has the right to seek asylum in another country if they are being persecuted in their own country.
- 15. Everyone has the right to a nationality.
- 16. Everyone has the right to marry and have a family.
- 17. Everyone has the right to own property on their own or with others. No one should have their property taken from them without good cause.
- 18. Everyone has the right to their own free thoughts, conscience and religion, including the right to practice their religion privately or in public.
- 19. Everyone has the right to say what they think and to share information with others.
- 20. Everyone has the right to meet with others publicly and privately, and to freely form and join peaceful associations.
- 21. Everyone has the right to vote in regular democratic elections and to take part in the government of their country.
- 22. Every country must do its best to ensure that everyone has enough to live a life of dignity.
- 23. Everyone has the right to work for a fair wage in a safe environment and has the right to join a trade union.
- 24. Everyone has the right to rest and leisure time.
- 25. Everyone has the right to a home, enough food and health care.
- 26. Everyone has the right to education and free primary education.
- 27. Everyone has the right to take part in the cultural life of their community and the right to benefit from scientific and artistic learning.
- 28. National and international laws and institutions must make possible the rights and freedoms set out in this declaration.
- 29. Everyone has the responsibility to respect and uphold the rights of others in their community and the wider world
- 30. No one has the right to take away any of the rights in this declaration.

# **HO 2: Definitions**

#### **HANDOUT 2. DEFINITIONS**

**Capacities:** The ability (knowledge, expertise, resources) of organizations or communities to deliver aid, reduce disaster risks and strengthen resilience.

Coercion and exploitation: Making someone do something against their will by using force or threats.

**Deliberate deprivation:** When a person with more power denies materials or other resources (such as information) to a more vulnerable person.

Dignity: The importance and value of a person, which gives them self-respect and makes others respect them.

**Discrimination:** Treating different categories of people unfairly or with prejudice, especially because of race, age or sex.

**Meaningful access:** Giving people access to help and services based on their needs and without barriers (that is, without discrimination).

**Protection risks:** The possibility of someone experiencing danger or harm—including through violence, coercion, discrimination or deliberate deprivation.

**Safety:** Being protected from danger, risk or injury, including physical, environmental, social, spiritual, political, emotional or psychological harm.

**Safe and dignified programming:** Making sure programs respect the safety, meaningful access and dignity of people and communities.

Violence: Behavior that aims to harm someone. It can be physical, sexual, psychological or structural.

**Vulnerability:** A characteristic or circumstance that puts a person at higher risk of being harmed or hurt. Vulnerability is different for each person and situation.

# TT 1: Power Walk Characters

# TRAINING TOOL 1. POWER WALK CHARACTERS

Adapted from Church World Service, Putting Dignity First: A guide to protective action in programming, 2009.

Adapt to the audience.

Member of a Religious Minority	65-Year-Old Male Farmer with a Wife and Six Children Living in a Region that Often has Extreme Flooding	Religious Leader Working in a Peaceful Community	15-Year-Old Female Head of Household in a Rural Village with Two Younger Sisters
14-Year-Old Second Wife of a Polygamous Husband	Refugee from a Neighboring Country	22-Year-Old Male Former Child Soldier	Male Police Officer
Permanently Disabled Survivor of an Earthquake	Member of Parliament	45-Year-Old Widow with Six Children	NGO Employee (Expatriate Staff)
Person Displaced by a Hurricane	Child Separated from Their Parents in Floods	NGO Employee (Local Staff)	Successful Male Business Owner
17-Year-Old HIV- Positive Boy Living on the Streets of a Large City	16-Year-Old Single Mother and Sex Worker	10-Year-Old Deaf Girl in an Orphanage	Humanitarian Worker with the United Nations

# TT 2: Protection Risks Role-Playing Scenarios

#### TRAINING TOOL 2. PROTECTION RISKS ROLE-PLAYING SCENARIOS

# Scene One: At the house of the Local Committee Chairperson (LCC)

LCC and young single mother

**WOMAN:** Approaches LCC at his home. "My family lost our home in the flood. We really need support."

**LCC:** Walks up to the woman. "That's terrible. I can help. That international agency is asking for lists of people who need help. I can put your name down."

**WOMAN:** "Thank you! My husband is gone and I have no one else to help me. I have three young children and they are hungry and cold at night."

**LCC:** "I can put you on the list, but you need to do something for me. Come inside my home and we can talk about it in private."

# Scene Two: After a food distribution

A teenage boy, a young man and a motorcycle taxi driver

The **teenage boy** has just received a bag of maize and is walking up the mountain back to his village to finally help his mother prepare some food for him and his siblings. It is 5 km away.

YOUNG MAN: "Hey! Where did you get that maize?"

**TEENAGE BOY:** "The district committee gave it to me."

YOUNG MAN: Pushes the boy down. "Why wasn't I given some? Give me yours."

**TEENAGE BOY:** "I need this for my family. Someone help!"

**DRIVER:** A motorcycle taxi driver stops. "Hey! Leave that boy alone. (Speaking to the teenage boy) "Here, I'll give you a ride, but only if you give me half of your bag of maize."

**TEENAGE BOY:** Sighs and gets into the taxi, relieved to be away from the young man who pushed him.

# Scene Three: Post-distribution monitoring

A second wife in a polygamous marriage, a Community District Officer (CDO) and a community member.

**WIFE:** Approaches CDO at sub-county office. "Please help me. I know you are giving out food and my children and I have not eaten in 3 days."

CDO: "okay, what is your name?"

WIFE: "Rose Okello."

**CDO:** Looking down at the list. "Last name Okello. Hmm. Your family is already on this list. Are you trying to cheat us? You can't come twice to the distribution!"

WIFE: "I'm not trying to cheat! That is my husband. Please, I need help."

**CDO:** (Turns the woman away and continues to the next person in line.)

...ONE WEEK LATER

**COMMUNITY MEMBER:** Approaches CDO at the sub-county office. "I think my neighbor was missed during the distribution. Her kids look very hungry, and I think it's been many days since they've eaten."

CDO: "What is your neighbor's name?"

**COMMUNITY MEMBER: "Rose Okello."** 

CDO: "Her husband was given food!"

COMMUNITY MEMBER: "Her husband has two wives. I don't think Rose was given any food."

# Scene Four: District disaster meeting

Chief Accounting Officer (CAO) and sub-county (SC) Chief

**CAO:** "There is money from this NGO to do cash-for-work activities. They said we can have people help replant the trees or dig trenches to earn money and recover their livelihood losses. Who do you want to offer this opportunity to?"

**SC CHIEF:** "I have some men that could do the work. They've been helping me recently and deserve it."

CAO: "What about the larger community? They said we should include women."

SC CHIEF: "Women cannot do this work. They need to watch their children."

# TT 3: Vulnerabilities and Capacities Cards TRAINING TOOL 3. VULNERABILITIES AND CAPACITIES CARDS

From Oxfam, Improving the Safety of Civilians: A Protection Training Pack, (2009).

<b>Profile 1</b> A 10-year-old girl	Additional information for Profile 1: This 10-year-old girl has a mother and father and is currently able to go to school regularly.	
Profile 2 A local committee member	Additional information for Profile 2: This committee member is a woman who is trying to create gender balance in local committees, but she is from an ethnic minority group that is discriminated against. She is being verbally abused and targeted by men in the community while she tries to do her job.	
<b>Profile 3</b> A farmer	Additional information for Profile 3: This farmer had to leave his land to find a safer location for his family. All of his crops were destroyed and his farming equipment was stolen. He currently has no access to land.	
<b>Profile 4</b> A disabled man	Additional information for Profile 4: This disabled man has a job working with the local Red Crescent Society.	
Profile 5 A cleaner at a UN peacekeeping base	Additional information for Profile 5: This cleaner is being forced to provide sexual favors to one of the UN workers. She is afraid she might lose her job if she refuses or complains.	
<b>Profile 6</b> A worker for a national NGO	Additional information for Profile 6: This man works for a local human rights NGO that is being targeted by the government. A couple of his colleagues were arrested last month.	
<b>Profile 7</b> A grandmother	Additional information for Profile 7: This grandmother is living with her daughter and her family. They have enough food and support.	
Profile 8 A mother with five children	Additional information for Profile 8: This mother's husband died and two of her children are missing after recent floods. She has no stable income to support her remaining three children and is very distressed.	
Profile 9 An internally displaced person returning to his place of origin	Additional information for Profile 9: This internally displaced person has received a support package to return to his place of origin. It will allow him to rebuild his home and buy some livestock.	
Profile 10 A new-born baby	Additional information for Profile 10: This new-born baby is the daughter of a family that has just been recognized as refugees by the UNHCR and will be moving to Norway soon.	

# Part 1: 1.2 Safe and Dignified Programming Training Pack

# Purpose:

This training is designed for local disaster risk reduction (DRR) and humanitarian staff. It aims to increase their knowledge and capacity on Safe and Dignified Programming, including:

- Concepts of Safe and Dignified Programming and how to apply them to disaster preparedness and recovery work
- Key tools and resources related to Safe and Dignified Programming and how to apply them to their work
- Identification of gaps in Safe and Dignified Programming and how to create action plans to address them

This training builds on the content of the <u>1.1 Safe and Dignified Programming Foundations Training</u>. If participants have already completed this training, facilitators should adapt certain exercises according to the guidance.

# Participants:

Community disaster planners and officers, including:

- Village-level DRR planners and coordinators
- Officers of homeowners' associations
- Community emergency responders
- Civil society actors
- Protection actors
- Representatives of women's groups and people with disabilities (PWD) associations
- Members of community-based organizations conducting DRR needs assessments at the community level

## Time:

#### Four days

# Handouts (HOs):

- HO 3: Summary of the Universal Declaration of Human Rights
- HO 4: Sex and Age-Disaggregated Data (SADD)
- HO 5: Sex/Age/Diversity-Safety/Access/Dignity (SAD-SAD)
- HO 6: Safe and Dignified Programming Framework
- HO 7: Example Safeguarding Policy
- <u>HO 8</u>: Protection Risks
- HO9: Gender-Age Marker
- HO 10: Information-Sharing Template
- HO 11: Information and Communication Questions in Rapid Needs Assessments
- HO 12: Feedback Channels
- HO 13: Feedback Channel Pros and Cons
- HO 14: 12 Steps to Setting Up Complaint-Handling Mechanisms
- HO 15: Inter-Agency Standard Committee (IASC) Six Rules
- HO 16: Developing a Referral Pathway for Essential Protection Services
- HO 17: WHO Psychological First Aid Pocket Guide
- HO 18: Action Plan Template

# Training Tools (TTs):

- TT 4: Power Walk Characters
- TT 5: Protection Triangle Puzzle
- TT 6: Pan Island Preparedness (Scenario A: Earthquake)
- TT 7: Pan Island Preparedness (Scenario B: Flooding)
- TT 8: Pan Island SitRep (Scenario A: Earthquake)
- TT 9: Pan Island SitRep (Scenario B: Flooding)
- <u>TT 10</u>: Character and Feedback Cards
- TT 11: Agree/Disagree Cards
- TT 12: Sexual Exploitation and Abuse Scenarios
- TT 13: Examples of Code of Conduct Breaches
- TT 14: Referral Web Nametags
- TT 15: Safe Response Cards
- TT 16: Dos and Don'ts of Psychological First Aid

# Materials:

- Sticky notes and pens
- Flipchart and markers
- Box (for suggestions)
- Vouchers (sticky notes or pieces of paper)

# Online Resources:

- Catholic Relief Services (CRS). <u>Protection Mainstreaming</u> [Video]. 2017.
- Washington Group on Disability Statistics. *Question Sets*. 2022.
- Al Jazeera English. *UK threatens to cut Oxfam aid over staff sex scandal* [Video]. 2018.
- Infoasaid. <u>Communication is Aid</u> [Video]. 2011.
- On sexual exploitation and abuse: Jaqueline UNDP. *To Serve with Pride* [Video].<sup>7</sup>
- Jean I., Hagens C., Anderson A., Archambault A. <u>CRS Feedback, Complaints and Response Mechanisms Guide</u>. CRS; 2021.

# Training Outline:

The workshop consists of three parts:

- 1. Concepts of Safe and Dignified Programming
- 2. Components of the Safe and Dignified Programming Framework
- 3. Action planning

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

<sup>&</sup>lt;sup>7</sup> In other languages: <u>Arabic/Chinese/French/Russian/Spanish</u>.

# **Opening Session: Welcome**

#### Time:

■ 45 minutes

# Handout:

Agenda

#### Materials:

- Sticky notes and pens
- Suggestions box with slips of paper and pencils
- Flipchart and markers

# **Preparation:**

■ Stick a piece of flipchart paper onto the wall

# **EXPECTATIONS, 5 MINUTES**

#### **Exercise**

**GIVE** sticky notes to participants as they arrive in the training room.

**ASK** them to write down their expectations and concerns about the training and stick them onto the flipchart. They do not need to write their name. Just before the session begins, group the expectations and concerns according to any themes that emerge.

# WELCOME EVERYONE TO THE WORKSHOP, 10 MINUTES

#### **Presentation**

**INTRODUCE** yourself (name, organization, position, background) and the purpose of the workshop.

# **EMPHASIZE** that:

- This is a safe space for learning from participants' practical experiences and knowledge.
- There are no right or wrong answers because Safe and Dignified Programming is not a rigid skill and must be adapted to different contexts.

**ENCOURAGE** participation from everyone in a comfortable and informal atmosphere by suggesting the use of simple language wherever possible.

# **INTRODUCTIONS AND ICEBREAKER, 10 MINUTES**

#### **Exercise**

ASK participants to stand in a circle.

**GIVE** one participant a ball, and ask them to say their name, role and either what their dream job was as a child or what is their secret talent.

**ASK** the participant to throw the ball to another person in the circle and repeat until everyone has been introduced.

# TRAINING OBJECTIVES AND AGENDA, 10 MINUTES

## **Presentation**

**SHOW** a flipchart with the objectives of the training and **EXPLAIN** they are for:

- Participants to understand the concepts of Safe and Dignified Programming, Psychological First Aid and protection/safeguarding disclosures
- Participants to become familiar with key tools and resources related to Safe and Dignified Programming, Psychological First Aid and the prevention of sexual exploitation and abuse (PSEA), and how to apply them to their work

# TRAINING OBJECTIVES AND AGENDA, 10 MINUTES

 Participants who work in DRR and humanitarianism to conduct capacity assessments, review gaps in their organizations' Safe and Dignified Programming and create action plans

**EXPLAIN** that the phrase "Safe and Dignified Programming" will be used throughout the training, but that some people may use "protection mainstreaming." The phrases refer to the same concept in that "protection mainstreaming" means implementing all work in a safe and dignified way.

[For those who have completed the Safe and Dignified Programming Foundational Training: **EXPLAIN** that while some content is the same, this training will be an opportunity to review concepts and further strengthen their understanding. There will also be opportunities for former participants to facilitate some sessions.]

**EXPLAIN** that the training will be conducted through presentations, exercises, plenary discussions and small group work.

**HIGHLIGHT** that this training will not qualify participants to develop or implement protection programs. Instead, Safe and Dignified Programming helps humanitarians improve what they are already doing.

**HIGHLIGHT** that they do not need to copy down what is in the handouts as these can be shared by email.

**SHOW** a flipchart page on the workshop outline and agenda, mentioning breaks and end time

**IDENTIFY** a timekeeper to give warnings 5–10 minutes before any scheduled breaks.

# **RULES AND HOUSEKEEPING, 5 MINUTES**

#### **Brainstorm**

**ASK** participants what "rules" they would suggest to make sure the workshop runs smoothly. You can also suggest some to help, such as:

- Treat others with dignity, even if we disagree.
- Respect others' opinions.
- Be open to new ideas.
- Ask questions and be curious.
- Listen to one another and speak one at a time.
- Respect confidentiality. Everything said in these conversations should stay in the room unless there is a safety issue.
- No one should be forced to join in the conversation.
- Participants can refuse or withdraw from activities without consequences.
- Turn off mobile phones and laptops.
- Raise hands to ask questions.
- Always be on time after breaks.

WRITE these on the flipchart and stick it onto the wall.

**EXPLAIN** to participants the location of the nearest fire exits and bathrooms.

# PARTICIPANT FEEDBACK CHANNELS, 5 MINUTES

# Presentation

**EXPLAIN** that feedback is important to improve the training and that all feedback is welcomed.

#### Suggestion Box

**PLACE** a labeled suggestion box in an easily accessible part of the room next to slips of paper and pencils.

# PARTICIPANT FEEDBACK CHANNELS, 5 MINUTES

**ASK** participants to write down and post any feedback (positive or negative) during breaks and at the end of each day that could improve the workshop. They can do this anonymously if they prefer.

**EXPLAIN** that suggestions will be reviewed at the end of each day.

**SHARE** what actions (if any) have been taken because of feedback each day, and why (or why not).

#### Car Park

WRITE "Car Park" on a piece of flip chart paper.

**STICK** this somewhere in the room.

**EXPLAIN** that any issues that are raised that are not linked to Safe and Dignified Programming or that require more time than is available in a session will be "parked" here. These ideas can be followed up on at the end of the day or after the workshop, as appropriate.

# **Session 1: Concepts of Safe and Dignified Programming**

#### Time:

■ 1 hour and 25 minutes

# Objectives:

- Participants understand the broad concept of protection
- Participants understand who we are protecting and why

## Key Messages:

- In its broadest sense, protection is about respecting rights.
- We are all born equal and with human rights; however, we do not all have access to those rights.

## Handout:

■ HO 3: Summary of the Universal Declaration of Human Rights (one copy per participant)

## **Training Tools:**

- TT 4: Power Walk Characters (one copy total)
- TT 5: Protection Triangle Puzzle (one per group of three–five participants), optional activity

#### Materials:

- Sticky notes
- Flipchart and pens

## Preparation:

- Cut out TT 4 Characters and TT 5 Slips.
- Ask participants who have completed the Safe and Dignified Programming Foundations Training to facilitate the 1.3 Power Walk exercise, providing notes as necessary.

# 1.1 DEFINING PROTECTION, 10 MINUTES

## **Presentation**

## **Purpose**

Introduce the concept of "protection"

#### **Process**

**SHOW** a flipchart with the definition of protection. **ASK** a volunteer to read it out:

"Protection is everything you do to make sure people's fundamental rights are respected and people are free from violence, coercion, discrimination and deliberate deprivation."

**EXPLAIN** that when a state is unable or unwilling to protect people's rights, the international community often takes responsibility for ensuring that the rights of individuals are respected. Some actors have a mandate to protect certain rights, but a range of actors also play a role, from individuals to non-governmental organizations (NGOs).

**EXPLAIN** that protection refers to the primary responsibility of states to protect the rights of people within their territory. This means having:

- An accountable government
- A functioning legal system
- A well-trained police force
- An army that protects civilians from attacks

**SHOW** flipcharts and **GIVE** an overview of the key actors responsible for protection (select the most relevant ones for your group's context):

#### 1.1 DEFINING PROTECTION, 10 MINUTES

- The International Committee of the Red Cross has a legal mandate to protect those affected by conflict under the Geneva Conventions.
- The Office of the UN High Commissioner for Refugees (UNHCR) is mandated by the United Nations (UN) General Assembly to advocate for human rights.
- The UNHCR is mandated to advocate for the protection of refugees and asylum seekers.
- The Sendai Framework for DRR, adopted by the UN, aims to protect people and their property, health, livelihoods and productive assets, and promote and protect all human rights—including the right to development.
- [If applicable for the group you are training] As **DRR** and humanitarian actors, we are also mandated to help individuals access their rights, for example, their right to safety, livelihood or shelter. This is a rights-based approach—it is not simply "charity."

#### **Debrief**

- In its broadest sense, protection is about respecting rights.
- Protection is the primary responsibility of the state; although, when they are unable or unwilling to act, other actors may step in.
- Some actors are mandated to protect certain rights, but a diverse range of actors also play a role—from individuals to NGOs, to DRR and humanitarian actors.

## 1.2 WHAT ARE HUMAN RIGHTS? 15 MINUTES

#### Presentation

#### **Purpose**

Give participants a more in-depth understanding of the Universal Declaration of Human Rights

# **Process**

**EXPLAIN** that some participants will have discussed human rights in their Safe and Dignified Programming Foundational Training.

**ASK** participants to share in plenary what they remember from that training.

**EXPLAIN** that the Universal Declaration of Human Rights outlines 30 fundamental rights and freedoms that belong to every person.

**ASK** participants to name some human rights they know. Write them on a flipchart.

**ASK** participants which rights they are protecting as part of their programs and service delivery.

**SHOW** a flipchart of some of the human rights that all people are entitled to that are particularly important in emergencies, including:

- #1: Everyone is born free and has dignity as a human.
- #3: Everyone has the right to life and the right to live in freedom and safety.
- #5: Everyone has the right not to be hurt, tortured or treated cruelly.
- #6: Everyone has the right to be treated as a person under the law everywhere.
- #15: Everyone has the right to nationality.
- #25: Everyone has the right to a home, enough food and health care.
- #26: Everyone has the right to education and to free primary education.

GIVE each participant a copy of the Summary of the Universal Declaration of Human Rights (HO 3). EXPLAIN that all of these rights belong to everyone (they are universal) and cannot be taken away from us (they are inalienable).

**EXPLAIN** that, because we empower individuals and communities to identify vulnerabilities and capacities, and because we address them through preparedness planning, we are taking a rights-based approach.

**EMPHASIZE** again that this is not a charity model; individuals have the *right* to the assistance we give.

#### **Debrief**

- Rights belong to everyone and cannot be taken away.
- We use a rights-based approach that focuses on enabling people to access those rights safely and with dignity.

#### 1.3 POWER WALK, 25 MINUTES

#### **Exercise**

#### **Purpose**

Show that not everyone has access to their human rights<sup>8</sup>

#### Process

[For participants who have completed the Safe and Dignified Programming Foundations Training: **ASK** several participants to facilitate the exercise for the rest of the trainees. **GIVE** them the facilitation notes ahead of time and ask them to prepare the activity.]

**ASK** participants to stand in a row across one side of the room, facing the facilitator.

**GIVE** the *Power Walk Characters* ( $\boxed{114}$ ) cards to participants. Tell them not to tell each other who is their character.

**ASK** participants to pretend to be their character and to imagine who they are and what their life is like. They must then think about how their character would reply to questions.

**ASK** them to listen to the questions and take one step forward if their answer to a question is "yes."

**READ** each of the following questions, and give participants enough time to decide whether to take a step:

- Did you have enough to eat today?
- Do you have cash in your pocket?
- Do you have a valid government-issued ID?
- Do you have access to a telephone?
- When you are sick, can you see a doctor and pay (if necessary) for their services?
- Do you travel freely in your country of residence?
- If you were robbed, would you go to the police to report the crime?
- Did you finish primary school?
- Does your family respect your opinions and ideas?
- Can you read the newspaper?
- Did you have access to clean water today?
- Did you have access to a latrine or toilet today?

**ASK** the participants to reveal their identities and explain why they stepped forward or not in response to particular questions. The following guiding questions may be helpful: What did you assume about your character's age, gender and ethnicity?

- Who are the most vulnerable members in your character's community?
- Who are the most powerful members in your character's community?
- How can limited access to resources expose people to threats and insecurity?
- Which characters would a natural disaster affect the most?
- Imagine it is your job to help after a natural disaster. Which characters will need special attention so they can get help?

<sup>&</sup>lt;sup>8</sup> This exercise was adapted from: Church World Service. Putting Safety and Dignity First. 2009.

#### **Debrief**

In plenary, **HIGHLIGHT** that:

- Those with more power and better access to their rights were closer to the trainer, and those who were more vulnerable were further back in the room.
- We are all born equal and with human rights; however, we do not all have access to those rights. This can be due to social, economic, political, ethnic or religious factors. These rights can be deliberately denied or abused, putting people's safety and dignity at risk.
- People in positions of power are more likely to have the resources and support they need to make sure their rights are respected. The most vulnerable may have fewer opportunities to claim their rights and may become invisible if humanitarian actors do not make a deliberate effort to find and listen to them.

# 1.4 PROTECTION TRIANGLE, 10 MINUTES

#### Presentation

#### **Purpose**

To clarify the difference between Safe and Dignified Programming and standalone protection.

#### **Process**

**EXPLAIN** that there are two types of protection work in DRR and humanitarian work, which can be shown in a triangle.

**SHOW** the *Protection Triangle* (TT 5)

**EXPLAIN** that Safe and Dignified Programming is the process of incorporating protection principles and promoting meaningful access, safety and dignity in programs. It means we should think about **how** assistance is given. For example:

- Adapt a shelter program so that ramps for PWD are included in the design.
- Make sure at-risk groups like PWD have access to information in a disaster (like early warning systems).
- Include women in disaster management committees.
- Design evacuation shelters so that there is a lower risk of gender-based violence.

**HIGHLIGHT** that Safe and Dignified Programming is represented in green in the triangle because it relates to the "GO" on traffic lights. **ALL** DRR and humanitarian actors need to consider that every organization and service provider has a moral and legal obligation to consider how their response affects the safety and dignity of program participants and their meaningful access to assistance.

**EXPLAIN** that stand-alone protection (also known as "dedicated" or "specialized" protection) is a specific sector for all activities that directly prevent or respond to acts of violence, coercion, discrimination or deliberate deprivation of services—such as:

- Counseling services for survivors of gender-based violence
- Reintegration of children associated with armed groups

**HIGHLIGHT** that this section is in red because this activity should be approached with great caution given the resources required to conduct them in a safe way that meets international standards. Stand-alone protection projects require specialist staff and dedicated resources—including providing legal services, medical support and case management.

#### **Debrief**

In plenary, **HIGHLIGHT** that:

- There are two types of protection work. The focus of this training is the green level of protection mainstreaming, which is otherwise known as Safe and Dignified Programming.
- Safe and Dignified Programming does not mean changing what we do. It means we should think about *how* assistance is given.

## 1.5 PROTECTION TRIANGLE PUZZLE (OPTIONAL), 20 MINUTES

#### **Exercise**

#### **Purpose**

Consider examples of different dimensions of protection

#### **Process**

**DIVIDE** participants into groups of 3–5 persons.

**GIVE** each group a copy of *Protection Triangle* (TT 5) with the examples on Page 2 cut out in no particular order.

**ASK** them to match the examples to either Safe and Dignified Programming or stand-alone protection. (*NOTE:* There are no "protection integration" examples, only "stand-alone" or "Safe and Dignified Programming.")

When everyone is finished (or after 10 minutes), in plenary go through each example and **EXPLAIN** as follows:

- Safe and Dignified Programming
  - Latrines built with a ramp for wheelchairs: providing access to services that are accessible to different groups.
  - Education project with a feedback and complaints box: providing access to services in a way that ensures any feedback or serious complaints are captured.
  - **Distribution of food in 5kg bags so older people can carry them:** providing assistance that is safe, dignified and accessible to different groups.
  - Early warning systems that include different ways of sharing information: ensuring information-sharing is accessible to all, particularly at-risk groups—including PWDs and those without access to technology.

#### Stand-alone

- Cash transfers for female heads of households to reduce their vulnerability to sexual
  exploitation: a project that specifically targets a vulnerable group with the aim of
  preventing violence or coercion against them.
- Counseling services for survivors of gender-based violence: a specialist activity requiring licensed professionals in the field of mental health.
- Advocacy with government authorities to address forced evictions of displaced people: specialist response to a housing, land and property issue involving deliberate deprivation, discrimination, violence and coercion.

#### **Debrief**

In plenary, **EXPLAIN** that:

- There is often confusion about different types of protection and what is expected of actors.
- The lines between each type of protection work can be blurred. In general, the further up the triangle a project falls, the more awareness/specialized knowledge teams need to have and the more resources are needed in terms of technical expertise and financial resources.

# 1.6 WRAP-UP, 5 MINUTES

#### **Presentation**

**SHOW** flip charts with the key messages from Session 1 to wrap up.

# **Session 2: Understanding Safe and Dignified Programming**

#### Time:

■ 1 hour and 30 minutes

## **Objectives:**

- Participants understand the concepts of "safety," "dignity" and "meaningful access"
- Participants understand why sex, gender, age and other diversity factors (including disability) are important to consider

## **Key Messages:**

- We use a rights-based approach that focuses on enabling people to access those rights safely and with dignity.
- Not all community members and participants are in the same situation. There are social dynamics linked to sex, age and other things (that we will call "diversity") that can impact people's safety, access and dignity in DRR and humanitarian programs.
- Understanding how sex, gender, age and diversity can impact participants' safety, dignity and access can help humanitarian actors adapt their programs.

#### Handouts:

- HO 4: Sex- and Age-Disaggregated Data (SADD)
- HO 5: Sex/Age/Diversity-Safety/Access/Dignity (SAD-SAD)

#### Materials:

- Sticky notes
- Flipchart and pens

### Online Resource:

■ Washington Group on Disability Statistics Questions

#### Preparation:

■ Six A4 sheets with lifecycles written out and completed sticky notes for Factors of Vulnerability: Age exercise.

# 2.1 DEFINING SAFETY, DIGNITY AND MEANINGFUL ACCESS, 20 MINUTES

## **Exercise**

### **Purpose**

Understand the three key concepts of Safe and Dignified Programming: safety, dignity and meaningful access

#### **Process**

**EXPLAIN** that safety, dignity and meaningful access are the three key concepts that guide and support all Safe and Dignified Programming.

**DIVIDE** participants into three groups.

**WRITE** "SAFETY," "DIGNITY" and "MEANINGFUL ACCESS" on separate sheets of flipchart paper and give one to each of the groups.

**ASK** participants to write down other words or phrases that explain their term on the paper. Give each team 5 minutes.

**ASK** participants to rotate to the next word. After another 5 minutes, repeat, so that they rotate to the final word.

**ASK** them to return to the concept they started with and read the notes that other groups have added.

In plenary, **DISCUSS** some examples for each term.

**GUIDE** the discussion, ensuring that these key points are included:

- **Safety:** Being protected from danger, risk or injury—including physical, environmental, social, spiritual, political, emotional or psychological harm.
  - Keeping program participants safe means understanding the types of violence, coercion, deliberate deprivation and discrimination they could face, and planning how to prevent or reduce these things.
  - Note that "safety" here does not cover staff security.
- Dignity: The importance and value of a person, which gives them self-respect and makes others respect them.
  - Being safe is not enough if people do not have their dignity. An individual's inner experience is as important as their outward physical needs. People need to feel valued to have a sense of self-respect, personal identity and autonomy. Respect for these can help carry people through extreme physical suffering.
- **Meaningful access:** The right or ability to receive assistance or to use a particular good or service. Unrestricted access means there are no barriers to using that good or service.
  - Access is defined as "the right or opportunity to make use of resources." However,
    people also need the power to decide how a resource is used. Although many people
    will access humanitarian support, this does not necessarily mean that the support is
    reaching those most in need. Those who are most in need might not be able to control
    how resources are used. There are many barriers that can prevent people from using
    and controlling assistance.

#### **Debrief**

- "Safety," "dignity" and "access" are key to understanding Safe and Dignified Programming approaches.
- Practical implications can change depending on the context, so it is important to clarify what these words mean and how they are defined.
- This is the responsibility of all DRR and humanitarian actors.

#### 2.2 FACTORS OF VULNERABILITY: SEX AND GENDER, 5 MINUTES

#### **Presentation**

#### **Purpose**

Explain how a person's sex and gender changes the risks they face, and how these things may impact their safety, access and dignity in a program

#### **Process**

[For participants who have completed the Safe and Dignified Programming Foundations Training: **ASK** participants to reflect on what they remember. Have them share in plenary.]

**EXPLAIN** that there is a tendency to focus on one factor when disaggregating data: the sex of program participants.

**EXPLAIN** that the sex of a person, and the socially prescribed differences between females and males (i.e., gender), are fundamentally important factors in emergencies because they determine how people experience natural disasters and armed conflicts.

**EMPHASIZE** differences between women and men:

- They will face different risks.
- They will have different roles. Women may be the primary caregivers while men may be the primary breadwinners.
- They will have different capacities. This means that men and women may have different abilities (including knowledge, expertise or resources).

■ They will respond in different ways. **EXPLAIN** that these factors often lead to significant differences in experiences during disasters. Emergencies tend to create, reinforce and exacerbate existing vulnerabilities. Therefore, women tend to be more affected because of historic inequalities. Due to this, it is important to consider gender in planning for emergencies as men and women will be impacted differently and will have different access to resources and services.

**EMPHASIZE** that analyzing the gendered power dynamics of who controls access to resources in communities, and how the crisis has changed these, is therefore a crucial starting point in understanding the different needs of men and women. For this reason, considering sex in analysis is not only collecting data disaggregated by sex but also analyzing all the dynamics between women and men.

#### **Debrief**

Understanding power dynamics and social norms between women and men is key to:

- Avoiding creating tension within a community and making existing vulnerabilities worse
- Making sure the program design is culturally appropriate
- Making sure both women and men are engaged in a program and benefit from its activities
- Data should be disaggregated by gender

# 2.3 FACTORS OF VULNERABILITY: AGE, 15 MINUTES

# **Group Exercise** and Discussion

#### **Purpose**

- Explain how a person's age changes the risks they face, and how it may impact their safety, access and dignity in a program
- Highlight how age can overlap with other factors—such as gender—to create greater risks

#### **Process**

**STICK** six pieces of A4 paper on a wall with one life stage written on the top of each: Pre-Birth, Infancy, Childhood, Adolescence, Childbearing Age, Older Age.

**DISTRIBUTE** sticky notes with the protection risks listed below written on them to participants randomly.

Pre-birth	Infancy	Childhood	Adolescence	Child- bearing age	Older age
Sex- selective abortion	<ul><li>Female infanticide</li><li>Differing access to care</li></ul>	<ul> <li>Early         marriage</li> <li>Female         genital         mutilation</li> <li>Family         separation         during         disaster</li> </ul>	<ul> <li>Transactional sex</li> <li>Forced marriage</li> <li>Trafficking</li> <li>Limited survival skills and knowledge</li> <li>Female genital mutilation</li> </ul>	■ Intimate partner violence	<ul> <li>Property grabbing</li> <li>Accusations of witchcraft</li> <li>Violence by younger members of families</li> <li>Lack of access to evacuation options</li> </ul>

**EXPLAIN** that the pages on the wall represent stages in the life of a woman.

**ASK** the participants to stand up and stick their risk under the correct life stage and explain why they placed it there. When everyone has stuck their sticky notes onto the wall, go through and correct any that were misplaced.

**EXPLAIN** that often DRR and humanitarian actors only collect sex-disaggregated data. However, this alone is not enough. Looking at a female program participant's potential life cycle, it is clear that their role, needs and the protection risks they face change over time.

**GIVE** the example of a young girl whose experiences will likely be very different to those of an older woman.

**NOTE** that it is also important to consider the varying protection risks that boys and men experience at different ages.

**EMPHASIZE** that age is therefore also a fundamentally important factor we need to consider. This means collecting data disaggregated by sex *and* age, and then analyzing the data so that we can understand the needs, vulnerabilities and capacities of men, women, boys and girls.

**EXPLAIN** that older people and pregnant women face particularly great risks during disasters as they may face difficulty evacuating due to physical constraints.

#### Debrief

- Data should be disaggregated by both sex and age.
- Protection risks—and also strengths and capacities—vary throughout a person's life. In the face of a disaster, younger and older people will have very different risks and experiences.
- Age should be considered alongside gender and other diversity elements as people may experience different and overlapping factors of vulnerabilities, which increase the risks they face.
- In order for disaster plans and preparedness efforts to effectively put all lives into safety, age has to be considered.
- **GIVE** each participant a copy of *SADD* (HO 4) to read through on their own time.

#### 2.4 FACTORS OF VULNERABILITY: DIVERSITY, 10 MINUTES

#### Presentation

#### **Purpose**

Introduce diversity as the third factor of vulnerability and show the many factors it covers (e.g., ethnicity, religion, disability, socioeconomic situation, language, etc.)

#### **Process**

[For participants who have completed the Safe and Dignified Programming Foundations Training: **ASK** participants to reflect on what they remember. Have them share in plenary.]

**EXPLAIN** that while age, sex and gender are important factors for everyone, people have many other characteristics that affect their vulnerability, needs and capacities. These differences must be recognized, understood and valued by humanitarian actors in each emergency.

**EXPLAIN** that "diversity" refers to a person's values, attitudes, cultural perspectives, beliefs, ethnic background, nationality, ability, health, social status, skills and other specific personal characteristics. Examples include:

- **Disability**: See below
- Economic: A person's skills and assets
- **Political**: Whether a person is part of (or excluded from) formal political processes and whether they have informal influence and power
- **Social/cultural**: A person's standing within society, often based on their ethnicity, religion, minority status, class, etc.

**EMPHASIZE** that, according to the context, there may be other elements of diversity.

#### **Debriet**

"Diversity" vulnerability factors reflect that differences between people (e.g., ethnic, religious, physical or mental capacities, social or cultural norms, etc.) can lead to complex power dynamics and protection risks.

## 2.5 DISABILITY, 10 MINUTES

#### **Presentation**

#### **Purpose**

Explain how impairment and a person's interaction with the environment can create a disability

#### **Process**

**SHOW** flip charts and **EXPLAIN** that an "impairment" is a problem with a person's body function or structure, and a "disability" is when an impairment reduces that person's ability to fulfill life roles or perform routine life skills.

**EXPLAIN** that this may be due to social or physical reasons:

- An impairment may be a short-term problem caused by an injury that will heal or a long-term or permanent one. There are many different causes and iterations of impairments. Impairments can be physical or mental and may include hearing/visual impairments.
- Disabilities are socially and contextually constructed because they are created by the interaction between a person and their social and physical environment (e.g., through discrimination, logistical difficulties, physical barriers or psychological challenges).

**ASK** participants to answer the following question in plenary:

■ How do you think disasters affect disability?

#### **DISCUSS** responses.

**EMPHASIZE** the following points:

- Emergencies can increase the vulnerability of PWD for many reasons, including:
- Separating them from, or reducing the capacity of, their caregivers
- The loss of assistive devices
- Difficulties in accessing critical information before, during and after a disaster
- Disasters also increase the number of PWD due to:
  - Injuries
  - Increased presence of disease
  - Damaged health care facilities
  - Food insecurity and malnutrition for pregnant and lactating mothers and children

## **EXPLAIN** that:

- The World Health Organization (WHO) says that 15 percent of the world's population has a disability.
- Approximately 46 percent of people over 60 years of age have a disability.
- People with disabilities are more likely to be left behind or abandoned during evacuation in disasters mainly due to a lack of preparation and planning, as well as inaccessible facilities, services and transportation options.

**REITERATE** that, when planning for and responding to disasters, we should assume that at least 15 percent of the population has some form of disability.

**EMPHASIZE** that there are some countries that have legal frameworks in place to protect the rights and entitlements of PWD. Mention any existing or upcoming relevant national laws for your context.

**ASK** participants how they collect data on disability and whether they have used or heard of the Washington Group Questions.

**EXPLAIN** that they include a set of six simple questions that can be used to disaggregate data on disability. There is also an extended set with more questions (including questions on anxiety and depression) and a set to use with children.

**TELL** participants that you will include the URL for the Washington Group questions in the follow-up email at the end of the training and encourage the participants to look at the different sets, translations and instructions on their own time.

#### **Debrief**

- A person may have a physical, hearing/visual or cognitive impairment, but they do not necessarily have a disability if they are able to take part in meaningful and important activities without obstacles.
- Approximately 15 percent of people have a disability.
- Emergencies increase the vulnerability of PWD and increase the number of PWD.

# 2.6 DISABILITY: TRUE OR FALSE, 10 MINUTES

# Presentation and Activity

#### **Purpose**

Help participants understand more about disability

#### **Process**

In plenary, **SHOW** flipcharts and **ASK** participants to say whether the following statements are true or false. After a discussion, give the answer and some explanation:

- "A person's level of disability doesn't change." FALSE
  - Disability changes all the time depending on attitudes and environment. As a person's abilities and/or the environment changes, so might an individual's ability to participate.
  - For example, a person who uses a wheelchair and lives in a specially adapted home close to their work and has an adapted workplace is not disabled. However, if their home is destroyed in an earthquake and they move to un-adapted temporary housing with an inaccessible bathing area located some miles away from their workplace, then they will no longer be able to independently move around their home, wash themselves or access their work location. They would then become disabled because of the interaction of their impairment and the environment.
- "Someone can have a problem with a body part and not have a disability." **TRUE** 
  - Someone can have a physical impairment and be able to fully participate in all aspects
    of life, for example, by using a wheelchair and having an accessible home and school
    and public transportation. They may do things differently because of their impairment,
    but they are not disabled because they can do everything that they want.
- "Two people can have the same impairment (for example, an amputated leg), but have different levels of disability." **TRUE** 
  - An amputee who successfully uses a prosthetic and is accepted by their family and social group has little to no disability. Someone who does not have a prosthetic leg or crutches to walk around and is mostly at home with a bad relationship with their family would be considered disabled.

#### **Debrief**

- Disabilities evolve constantly depending on a person's abilities and/or changes in the environment.
- It is crucial to consider these changing needs when targeting and deciding selection criteria for those most in need—this means involving people and communities in deciding on criteria.

## 2.7 SAD-SAD, 15 MINUTES

#### Presentation

#### **Purpose**

Introduce the "SAD—SAD" approach, which connects factors of vulnerability to their impacts on program participants

#### **Process**

**SHOW** flipcharts with the SAD–SAD approach.

**EXPLAIN** how vulnerability factors (sex, age and diversity) can have an impact on the safety, access and dignity of program participants.

**SHOW** that the first letter of each word (Sex/Age/Diversity—Safety/Access/Dignity) forms the words SAD and SAD.

GIVE each participant a copy of SAD-SAD (HO 5)

**ASK** participants to give examples from their own experience or suggest a context in which one specific factor of vulnerability can influence the safety, access and dignity of program participants. For example:

- Girls, women, elderly or PWD are vulnerable to violence in overcrowded evacuation sites (i.e., sex/diversity impacting safety).
- One ethnic/religious minority group is excluded from participation in community disaster management committees (i.e., diversity impacting access).
- Children are not allowed to share their ideas on disaster preparedness plans during community meetings (i.e., age impacting dignity and potentially access).

#### **Debrief**

- Not all community members and participants are in the same situation. There are social dynamics linked to sex, age and other elements (i.e., "diversity") that can impact people's safety, access and dignity in DRR and humanitarian programs.
- Vulnerability factors often have a cumulative effect. For instance, an elderly widow from a marginalized minority group can be more at risk than a 40-year-old woman married to a local leader.
- Understanding how sex, age and diversity can impact participants' safety, access and dignity can help humanitarian actors adapt their programs. For this reason, data collected in a project should be disaggregated by sex, age and, when possible, diversity.

# 2.8 WRAP-UP, 5 MINUTES

#### **Presentation**

**SHOW** a flip chart with key messages from Session 1 to wrap up.

**SHOW** a flip chart with key messages from Session 2 to wrap up.

# Session 3: Using a Safe and Dignified Programming Approach

#### Time:

2 hours and 25 minutes

## **Objectives:**

- Participants understand what Safe and Dignified Programming is, and why it is important
- Participants become familiar with the Safe and Dignified Programming Framework

## Key Messages:

- Safe and Dignified Programming is the responsibility of all DRR and humanitarian actors.
- One approach to Safe and Dignified Programming is outlined in the Safe and Dignified Programming Framework, which includes eight core components.

#### Handouts:

- HO 6: Safe and Dignified Programming Framework (one copy per participant)
- HO 7: Example Safeguarding Policy (one copy per participant)

# **Training Tools:**

■ TT 6 or TT 7: Pan Island Preparedness (one copy per participant)—pick Scenario A or B for the group

#### Materials:

- Sticky notes
- Flipchart and pens

## Online Resources:

- CRS, <u>Protection Mainstreaming</u> [Video]
- Al Jazeera English, <u>UK threatens to cut Oxfam aid over staff sex scandal</u> [Video]

# 3.1 PROTECTION MAINSTREAMING VIDEO, 30 MINUTES

#### Video

## **Purpose**

Highlight the importance of Safe and Dignified Programming in emergencies and preparedness work

#### **Process**

**SHOW** the <u>protection mainstreaming video</u>.

SPLIT participants into groups of five.

**ASK** the groups to discuss the following questions for 15 minutes, writing notes on a piece of flipchart paper:

"How is protection mainstreamed in your DRR and resilience work? What does this mean for the safety, dignity and meaningful access of program participants?"

After 15 minutes, ASK each group to present in plenary.

## **Debrief**

- Safe and Dignified Programming is about prioritizing safety, dignity and meaningful access to humanitarian assistance.
- All actors have an obligation to think about this.
- One approach is outlined in the Safe and Dignified Programming Framework (HO 6) that consists of eight core components.

## 3.2 SAFEGUARDING IN HAITI VIDEO, 15 MINUTES

#### Video

## **Purpose**

Introduce participants to the concept of safeguarding

#### Trainer's note

If the Haiti video is not relevant to your context, draft several scenarios and read them aloud instead of showing the video. Lead a discussion on key issues, including what should have been done to prevent each scenario and how they impacted the organization and program participants.

#### **Process**

SHOW the Haiti safeguarding video.

**ASK** the following questions:

- What was happening in Haiti?
- Who was involved in the scenario?
- What do you think should have been done to prevent this incident/scenario?
- How did the scenario in Haiti impact Oxfam?

#### **Debrief**

An absence of procedures and systems related to safeguarding can have major consequences for individuals, communities and organizations.

## **3.3 WHAT IS SAFEGUARDING? 15 MINUTES**

#### **Presentation**

#### **Purpose**

Define safeguarding in greater depth

#### **Process**

**ASK** participants what they know about safeguarding or PSEA (the prevention of sexual exploitation and abuse).

SHOW the definition of safeguarding:

"The responsibility that organizations have to make sure their staff and work do not harm children and adults who are at risk, and do not expose them to abuse or exploitation."

**EXPLAIN** that PSEA falls under this umbrella because "SEA (sexual exploitation and abuse) refers to harm to program participants committed by aid workers or service providers.

GIVE participants a copy each of Example Safeguarding Policy (HO 7).

**EXPLAIN** that this is an example of a safeguarding policy. It requires organizations to commit to a zero-tolerance approach to sexual exploitation and abuse.

#### **Debrief**

- Safeguarding helps keep staff and program participants safe.
- Having a safeguarding policy is critical for any organization.

# 3.4 THE DIFFERENCE BETWEEN SAFEGUARDING AND SAFE AND DIGNIFIED PROGRAMMING, 20 MINUTES

# Presentation and Quiz

#### **Purpose**

Highlight the differences between safeguarding and Safe and Dignified Programming

#### Process

 $\boldsymbol{\mathsf{ASK}}$  participants to explain the similarities and differences between protection and safeguarding.

# Briefly **EXPLAIN** that:

Safeguarding is about preventing harmful interactions between staff, and between staff and program participants.

- Protection is about preventing harmful interactions between program participants and community members.
- Any staff misconduct against other staff or against program participants is a safeguarding case (e.g., a humanitarian actor distributing food in exchange for sexual favors from a program participant).
- Any harm caused by a community member/program participant against another community member/program participant is a protection case (e.g., a community member abusing a child).
- A Safe and Dignified Programming approach is about ensuring both safeguarding and protection risks are considered in programs (i.e., making sure that activities do not cause harm, and that they enhance the safety, dignity and access of program participants).

**EMPHASIZE** that for safeguarding, "staff" also includes anyone with a contractual relationship with the organization—including volunteers, partners, suppliers, contractors and other affiliates.

**SHOW** flipcharts showing the differences between safeguarding and protection.

#### **REITERATE** that:

- Staff (or volunteers/affiliates) harassing other staff falls under **safeguarding**.
- Staff (or volunteers/affiliates) abusing or exploiting program participants falls under safeguarding.
- Community members/program participants harming, abusing or exploiting other community members or program participants falls under **protection**.

For the quiz, **ASK** participants to put a thumb up if they think the answer is YES (i.e., a **safeguarding** concern) and put a thumb down if they think the answer is NO (i.e., a **protection** concern). You can use flip charts.

#### **DISCUSS** each answer.

- A literacy teacher employed by an NGO uses physical punishment against a student. YES
- A community member sexually abuses a female program participant in her home. NO
- A construction company hired by a DRR actor employs a 10-year-old boy to construct an evacuation shelter. YES
- A 12-year-old female program participant gets married to a community member and drops out of a school that is supported by an NGO. **NO**
- A volunteer in a humanitarian organization sexually harasses a cleaner. **YES**
- A project assistant hires a 10-year-old girl to work in her house. YES
- The director of a humanitarian organization pays for prostitution on vacation in a country where prostitution is legal. **YES**

NOTE on the last scenario: Some participants may not perceive engaging prostitutes as a safeguarding issue. They may feel there is consent as it is a legal service that is paid for, and no one is forced to engage in it. However, remind them of the power imbalance, and that we work in contexts where people may do anything to survive. Informed consent may not be possible. People may appear to "consent" to engage in transactional sex, but this might not be what they want. They may feel they have no other choice and therefore it is not true consent, as their agreement may not be informed.

#### 3.5 ISLAND PREPAREDNESS SCENARIO, 30 MINUTES

# Group Work and Discussion

#### **Purpose**

Highlight the importance of Safe and Dignified Programming in disaster preparedness work, and to show how DRR actors and local humanitarian actors can apply the Safe and Dignified Programming Framework

#### **Process**

**EXPLAIN** that Safe and Dignified Programming is critical to DRR work. Organizations plan to mitigate disaster risks for the most vulnerable populations, so it is important to think about how to increase the safety, dignity and meaningful access of program participants.

**GIVE** a copy of *Pan Island Preparedness* to each participant (<u>TT 6</u> or <u>TT 7</u>). (*NOTE:* There are two options available—Scenario A: Earthquake and Scenario B: Flooding. Choose the one most relevant to the local context.)

**ASK** one participant to read the *Background* section in the scenario and another participant to read the *Activities* section.

**SPLIT** participants into small groups of three to five participants.

**ASK** the participants to refer to the eight components in the *Safe and Dignified Programming Framework* (HO 6). Offer the following guiding questions:

- How could the project increase risks to vulnerable people?
- What could your organization do differently to avoid these risks?

**GIVE** participants 10 minutes to discuss their ideas. **DISCUSS** in plenary and write responses on a flipchart. Some ideas are provided below:

- Analysis. Analysis is not being done on vulnerabilities, which could lead to vulnerable people's exclusion from program and preparedness planning, physical safety risks and risks of gender-based violence. There are no data disaggregated by age and disability, there is a limited understanding of sex and gender norms and a lack of understanding of vulnerable groups (e.g., who has access to phones, who can access evacuation centers due to the distance, barriers faced by PWD). Focal points are male, and they will help households develop readiness plans, but may not account for needs of diverse groups in household planning.
- Targeting and diversity of need. Focal points are male and will lead household targeting and distribution of "Go Bags", which could increase the risk of sexual exploitation, abuse and/or exclusion. Women and people from other vulnerable groups should also be DRR focal points. Female-headed households and people without phones (or credit/power) may not be able to access early warning systems.
- **Information sharing.** For people without cellphones or who are illiterate, a lack of means to share information could lead to exclusion and physical safety risks. The warning system and readiness checklists for households require phones. Evacuation center volunteers are not trained in referral pathways. Men are responsible for information-sharing, which could lead to exclusion of certain groups, given gender segregation in communities.
- Community engagement and participation. There has been no community consultation on evacuation points, leading to the risk of exclusion/lack of access for certain groups. Male focal points are responsible for communicating with the community and targeting, which could lead to exclusion of other groups—such as women and PWD.
- Feedback and complaints mechanisms. Feedback mechanisms are not in place, and there is no analysis of how different groups can share complaints.
- Staff conduct. Evacuation center volunteers did not receive training on staff conduct, which creates potential safeguarding risks—including the risk of sexual exploitation and abuse. It is unclear whether DRR focal points have received staff conduct training or a Code of Conduct to sign, which also leads to exploitation and abuse risks as they will be distributing Go Bags and targeting households for repair projects.
- **Mapping and referral**. There is a lack of understanding on mapping and referral, as evacuation center volunteers are not trained.

■ **Coordination and advocacy.** It is unclear whether there was coordination to find out what services were already available and what gaps exist in the current provisions.

**DISCUSS** what could be done differently to mitigate risks, with some examples including:

- Conducting analysis on data disaggregated by sex, age and disability
- Including women and diverse groups as focal points
- Using different ways to share information
- Creating feedback mechanisms
- Training focal points and volunteers on the conduct of conduct

#### Debrie

- The Safe and Dignified Programming Framework can help DRR and humanitarian actors identify areas in which their programs may be creating new risks or making existing risks worse.
- If Safe and Dignified Programming is not considered, programs can cause harm.

## 3.6 WRAP-UP DAY 1, 5 MINUTES

#### Presentation

**SHOW a** flipchart with the key messages from Session 3 to wrap up.

**EXPLAIN** that Day 2 will focus on the components of Safe and Dignified Programming. **ASK** participants to write down suggestions for Day 1 and put them in the suggestions box.

**ANSWER** any questions in the Car Park.

# **Session 4: Components of the Safe and Dignified Programming Framework**

# Time:

■ 1 hour and 50 minutes

# Objective:

■ Participants understand that a comprehensive analysis (including of the protection context) is important throughout the program cycle

# Key Messages:

- A good analysis is needed so that our programs and services are not based on bias or assumptions.
- Analysis of the context (including protection risks) should inform decisions and should be regularly updated.

# Handouts:

- HO8: Protection Risks (one copy per participant)
- HO 9: Gender-Age Marker (one copy per participant)

# Materials:

- Sticky notes
- Flipchart and pens

4.1 WELCOME TO DAY 2 AND RECAP OF DAY 1, 10 MINUTES			
Discussion	WELCOME the participants to the second day of the training.  SHARE any feedback from Day 1 and any changes made because of that feedback.  REMIND everyone of how they can give feedback.		
	ASK participants to think back to Day 1 and share:  One thing they learned  One thing they found surprising		

## **4.2 INTRODUCING ANALYSIS, 10 MINUTES**

#### **Brainstorm**

#### **Purpose**

Show why the Analysis core component of the Safe and Dignified Programming Framework is important, and how it helps the safety, dignity and meaningful access of program participants

#### **Process**

**REFER** participants to their copy of the *Safe and Dignified Programming Framework* (HO 6). **SHOW** a flipchart with the definition of analysis and its indicators.

	What this means		Indicators
Analysis	All programming is underpinned by an understanding of the protection context throughout the program cycle in order to ensure safety, dignity and meaningful access for people and communities.	1.1	Questions are included in needs assessments and design processes to ensure understanding of vulnerabilities and to identify barriers to safety, access and dignity for diverse and vulnerable groups*
		1.2	Protection- and safeguarding-related threats, vulnerabilities and capacities, as well as power dynamics, are analyzed. They also inform programming and are updated regularly throughout the program cycle.
		1.3	All data collected is disaggregated by sex, age, disability and, where appropriate, other diversity factors—such as language and ethnicity—and is used to inform programming.
		1.4	Systems are in place to safeguard personal information collected from communities and keep it confidential.

<sup>\*&</sup>quot;Vulnerable and diverse groups" may refer to: women, men, girls, boys, youth and older people, as well as PWD and specific minority or ethnic groups without any such distinction (Core Humanitarian Standards).

In plenary, **ASK** participants to share their ideas on why analysis is important in DRR and management work.

**WRITE** their answers on a flipchart. The following questions can be used as prompts, if needed:

- Why is it important to include questions in needs assessments on vulnerabilities, capacities and barriers?
- Why is it important to analyze protection issues in the context in which we are conducting DRR and response work?
- How does collecting data disaggregated by sex, age and disability/diversity increase the safety, dignity and access of program participants?

#### **Debrief**

- Organizations should understand the context in which they are working. They should understand how their programming will impact and be affected by (both positively and negatively) the wider situation.
- Analysis should include information on barriers that prevent people from accessing services, especially for people who might face discrimination.

#### 4.3 BUBBLE ANALYSIS PART 1: IDENTIFYING PROTECTION RISKS, 30 MINUTES

#### **Exercise**

#### **Purpose**

Identify the existing protection risks in participants' contexts

#### **Process**

**DIVIDE** participants into groups of 3–5 people.

GIVE each participant a copy of Protection Risks (HO 8).

**EXPLAIN** that this list includes some of the protection issues that might be present in their context.

**ASK** the groups to work through the list of protection risks and remove/add the risks that they think exist in the context(s) in which they work.

Then **ASK** them to choose 3–5 risks from each category (for example, sexual- and gender-based violence (SGBV); child protection; physical safety of civilians; housing, land and property; lack of access to services and psychosocial distress) and write one risk per sticky note. The groups should then group these risks together around the relevant category on a sheet of flipchart paper. For example, under the category of child protection, the participants might have two sticky notes: one for child recruitment and one for child labor. Most contexts will include several categories, each with several different risks.

#### Debrief

- A bubble analysis is one way of presenting information on protection risks in a specific context.
- Non-protection staff should NOT have to collect data about protection risks directly from affected populations. Rather, they should use existing information and data collected by protection experts, such as the Protection Cluster and protection-mandated organizations. Generalist organizations may do harm by asking about protection issues because of the sensitive nature of the subject.

#### 4.4 BUBBLE ANALYSIS PART 2: MITIGATING PROTECTION RISKS, 30 MINUTES

#### **Exercise**

#### **Purpose**

Identify mitigation actions that address the protection risks identified in participants' contexts

#### **Process**

**ASK** participants to reform into the groups from the previous exercise.

**ASK** the groups to use their bubble analysis and answer the following questions for each risk identified:

- Could a DRR program increase this protection risk in any way?
- Can you think of mitigation measures/strategies? For example:
  - If PWD are unable to access information through the early warning system, adapt the format of the existing communication materials so that more people can access them.
  - If women and girls are at high risk of gender-based violence at evacuation shelters, make sure there are separate spaces/facilities for women and girls, avoid overcrowding, train staff in gender-based violence and staff conduct and map referral pathways.
  - Include women in community disaster management committees.
  - If people with disabilities cannot access evacuation sites, change to a new location or make changes to make the sites accessible.
  - If child labor is common in the context, check that all DRR volunteers and staff are over the minimum working age and all vendors have signed the organization's Code of Conduct and Child Safeguarding Policy.
  - If armed gangs are present in the area, hold distributions at a time and in a place that is safe for program participants. Consider organizing distributions closer to their homes or doing home-to-home deliveries for more vulnerable households.

What are the challenges to addressing this risk (e.g., budget, organizational barriers or donor requirements)? How can they be addressed?

#### Dehrief

- In plenary, **EXPLAIN** that the information collected in a protection analysis should be used to understand how a program will affect, and be affected by, those protection risks.
- Staff can then make adjustments to the program to ensure it enhances the safety, dignity and meaningful access of program participants.

# 4.5 GENDER-AGE MARKER, 25 MINUTES

# Group Exercise

#### **Purpose**

Introduce participants to the European Commission's department for European Civil Protection and Humanitarian Aid Operation (ECHO) Gender-Age Marker (GAM)

#### **Process**

**EXPLAIN** that ECHO is a European donor with experience working with DRR programming. **DIVIDE** participants into pairs.

**SHOW** a flipchart with some GAM with sample questions for interviews and direct observation.

**ASK** participants to adapt the questions so that they focus more on sex, gender and age considerations.

In plenary, **ASK** each pair how they adapted the questions.

**SHOW** a flipchart with some ECHO's examples.

**EXPLAIN** that this list shows how questions can be adapted to gather more sex- and age-disaggregated information.

GIVE each participant a copy of Gender-Age Marker (HO 9).

#### **Debrief**

- The GAM shows how to adapt needs assessment questions so that sex, gender and age are considered.
- It is important to include sex, gender, age and other diversity questions in the early stages of program development so that safety, dignity and access issues experienced by diverse groups are considered.

#### 4.6 WRAP-UP, 5 MINUTES

### Presentation

**SHOW** a flipchart with the key messages from Session 4 to wrap up.

# **Session 5: Information Sharing**

## Time:

■ 1 hour and 45 minutes

# Objectives:

- Participants develop an understanding of the importance of sharing accurate and timely information
- Participants understand how to inform program participants about their rights

# Key Messages:

- Different groups should understand the role of the organization and its work—including what services are available to them.
- Community members should receive information about the expected behavior of staff.
- Information should be shared through a range of communication methods that are appropriate to the needs of the community, especially the most vulnerable and marginalized groups.
- It is important that DRR and local humanitarian actors share information with vulnerable groups early in a response.

#### Handouts:

- HO 10: Information-Sharing Template (one copy per participant)
- HO 11: Information and Communications Questions in Rapid Needs Assessments (one copy per participant)

## **Training Tools:**

■ <u>IT 8</u> or <u>IT 9</u>: Pan Island SitRep (one copy per participant)—pick Scenario A or B for the group

## Materials:

- Sticky notes
- Flipchart and pens

### Online Resource:

■ Communication is Aid clip

## Preparation:

■ Broken phone game—write a message no longer than 40 words on a piece of paper

5.1 BROKEN PHONE GAME, 10 MINUTES		
Group	Purpose	
Exercise	Show that information can be misunderstood, and how information is lost when only shared once and in one format	
	Process	
	ASK participants to stand in a row so that each is looking at the back of the next person.	
	<b>EXPLAIN</b> that a short message will be passed down the row, but each person must only whisper the message to the person in front of them once, and the listener may not ask any questions.	
	<b>WHISPER</b> the message to the person at the back of the row, who must then whisper the message to the person in front of them.	
	<b>REPEAT</b> this process until the message has reached the person at the front of the row.	
	ASK the last person to say the message out loud.	
	<b>READ</b> the original message out loud and compare the two versions.	

#### **Debrief**

- Information can be easily misinterpreted or misunderstood when passed along. It is easily lost when a message is only received once and in one format.
- It is therefore important to use different formats for sharing the same information.
- It is important to develop clear messages that are adapted to your target audience. We need to train staff on what those messages are and how to communicate clearly with different groups on a regular basis.

## **5.2 INTRODUCING INFORMATION SHARING, 10 MINUTES**

#### Video

#### **Purpose**

Introduce participants to the Information Sharing core component and give an overview of what it means, why it is important and how it helps enhance the safety, dignity and meaningful access of program participants

#### **Process**

**REFER** participants to their copy of the *Safe and Dignified Programming Framework* (HO 6). **SHOW** the definition of information sharing and its indicators.

	What this means		Indicators
communities informed of t rights and entitlements, and have acc	participants and communities are informed of their rights and entitlements, and have access to accurate and timely	3.1	Diverse and vulnerable groups understand the role of the organization and its work, including what services are available to them.
		3.2	Staff share information through a range of communication methods (formats, language and media) that are appropriate to the needs of the community, especially for the most vulnerable and marginalized groups.
		3.3	Community members receive information sufficient to understand what they can expect in terms of behavior from staff and partners, particularly about preventing sexual exploitation, abuse and harassment.
		3.4	When collecting communications material (e.g., photos and stories), staff prioritize the safety and dignity of community members, ensuring their full understanding, participation and permission.

**SHOW** the video Communication is Aid.

Afterwards, **ASK** the group what they think about the idea that communication is a form of aid.

**ASK** participants to share what "good information sharing" is, and why it is important in disaster preparedness programs.

**Write** their answers on flipchart paper and relate their examples to the definition of information sharing and its indicators. Use the following questions as prompts, if needed:

- Why is it important for DRR program participants to understand their rights and entitlements?
- How does having accurate/timely information enhance the safety, dignity and access of program participants, especially prior to a disaster?

■ Was there an experience where not having information put you in a stressful situation?

#### **REPEAT** the points made in the video:

- The right information at the right time, given to the right people, in the right way, can be lifesaving, enabling affected populations to make well-informed decisions about where and how they access assistance.
- Particularly for disaster preparedness, receiving timely, accurate information about disaster mitigation and response, as well as the availability of services prior to an emergency, can empower communities and individuals and save lives.
- Information must be shared using methods that reach marginalized groups. A lack of information can be a significant barrier to certain groups vulnerable in disasters.

## 5.3 OVERVIEW OF WHAT, WHO, HOW AND WHEN, 5 MINUTES

#### Presentation

#### Purpose

Give a brief overview of what information should be shared, who it should be shared with, and how and when it should be shared

#### **Process**

**SHOW** the WHAT, WHO, HOW and WHEN on a flipchart and briefly explain each:

- What information should actors give to people and communities affected by an emergency or prior to an emergency?
- **Who** should receive this information? To whom should organizations target their messages?
- **How** should information be shared with an actor's target audience? For example, what formats and languages should be used? Where will information be shared?
- When is it realistic and practical for an actor to share types of information?

**GIVE** participants a copy of the *Information-Sharing Template* (HO 10). **EXPLAIN** that an information-sharing plan is incredibly important for DRR actors because information shared before a disaster that reaches all groups can save lives and reduce the disaster's impact. Sharing information during and after an emergency is also critical. Actors will need to think about the best way to share information, adapting it to the target group. For example:

- If a project in a school involves teaching children about earthquake drills, and the children will be in frequent contact with DRR staff, staff should explain the Code of Conduct using images that children can understand.
- In a community where people speak many languages and/or literacy is low, messages may need to be shared in a range of ways. A combination of visual, written and oral methods may be suitable.

#### **Debrief**

- Timely, reliable information can save lives, especially in disaster risk reduction and management (DRRM).
- Information-sharing can be broken down into what information should be shared, who it should be shared with, and how and when it should be shared with different groups.

## 5.4 WHAT INFORMATION TO GIVE, 15 MINUTES

#### **Group Exercise**

#### **Purpose**

Discuss the minimum information that should be shared with program participants

#### **Process**

**DIVIDE** participants into groups of 3-5 people.

**GIVE** participants a copy of the *Pan Island Sitrep* (<u>TT 8</u> or <u>TT 9</u>) (*NOTE*: There are two options available—Scenario A: Earthquake and Scenario B: Flooding. Choose the one most relevant to the local context.)

**ASK** a participant to read out the scenario. **TELL** the groups that, over the next few exercises, they will develop an "information sharing plan" for this project.

**GIVE** each group a piece of flipchart paper to write it on. They may want to make a big copy of the template from HO 10.

For the first part of the plan, **ASK** the participants to think about the context on Pan Island and the planned response. Then **ASK** them to answer the following question: What information do you need to share with program participants?

GIVE participants time to discuss and write up the "WHAT" section of their plans.

**SHOW** a flipchart and **EXPLAIN** that the minimum information that should be shared with program participants includes:

- Who is the organization?
- What is the project or service?
- How long will the project last?
- When will activities take place?
- Who is targeted?
- How can people make a comment or complaint?
- What can people expect of staff behavior?
- Contact details for the organization.

#### **Debrief**

If people have access to relevant and useful information, it can help them get the support or assistance they need.

#### 5.5 WHO TO SHARE INFORMATION WITH, 15 MINUTES

### **Group Exercise**

### **Purpose**

Show that information should reach different groups in the community, including the most affected and marginalized

#### **Process**

**ASK** the groups to update their information sharing plan for *Pan Island Sitrep* ( $\top \underline{18}$  or  $\underline{\top \underline{19}}$ ) focusing on:

- Who should you share the information with?
- Which groups may find it hard to get information?

After 10 minutes, in plenary, **ASK** each group to share a summary of their plan. **LEAD** a discussion focusing on:

- This is a highly hierarchical society. This means that some groups may have greater control over information and influence over decisions about who receives aid.
- The society is gender-segregated, and **women** often stay at home. This means that information will have to be targeted at men and women in different ways. This will require sensitive management.
- The presence of an above-average number of **PWD** may require different methods of communication.

■ Unaccompanied children are less likely to participate in community meetings and may be harder to reach.

#### **Debrief**

- Different groups within communities will experience emergencies in different ways, and they may have different capacities, roles and needs.
- This means that information-sharing strategies need to target different groups in different ways so that people get the correct information.

## 5.6 HOW TO GIVE INFORMATION, 15 MINUTES

#### **Group Exercise**

#### **Purpose**

Show that information should be shared in different ways (e.g., formats, languages and locations) to reach different groups

#### **Process**

**ASK** the groups to update their information-sharing plan by answering the following questions:

- What three mechanisms/formats would you use to share information with the most vulnerable groups in this context?
- What are the advantages and disadvantages of each mechanism/format?

After 10 minutes, in plenary, **ASK** each group to share a summary of their plan. **LEAD** a discussion. Different options in this context could include:

- **Cellphones.** Cellphone coverage is high in Pan but would only reach men. After the disaster, people may no longer have phones, network access, chargers or credit.
- Face-to-face or home visits. These types of visits would reach women, PWD, older people and children; however, visits take a lot of staff time. Staff must also give the same information to everyone.
- **Radio programs.** Radios might work in this context; however, people would need radios, a power source and a signal. The programs would also need to be in the right language.
- Posters, loudspeakers and/or theatre groups in marketplaces. These would reach many people, and it would be easier to provide up-to-date information. However, some groups might not get the information—including women and other groups who tend to stay at home.

#### **HIGHLIGHT** that:

- Vulnerable groups should receive information in different formats
  - One written version—including posters, leaflets and banners
  - One verbal version—including loudspeaker messages, information desks or outreach worker visits
  - One pictorial version to help reach children and people who cannot read
- Access to communication infrastructure could change during and after a disaster
  - Are cellphone networks disrupted?
  - Are radio or television broadcast towers damaged?
  - Are power supplies disrupted?
- It is important to think about where information is accessed
  - Central points are good for reaching large numbers of people, but those with mobility issues may be excluded.
  - Information can be given in static (e.g., poster) or movable (e.g., loudspeakers on a car) forms.
  - Face-to-face visits to camps or shelters are an important way of reaching those who are not able to leave their homes or access public spaces.

- The information being shared may change over time
  - If messaging is going to change, it is usually better to use verbal techniques.
  - If the information is not going to change, written or visual formats may be better.
- Information sharing depends on trust
  - It is important to verify information using several sources. Spreading misinformation can cause great harm (for example, misleading early warnings can cause people to panic-buy groceries).
  - Actors should build on existing information-sharing networks. In some contexts, there
    may be established ways of creatively sharing information—such as street dramas,
    comics or street art.
  - Use local languages (including local scripts).

#### **Trainer's notes**

Additional ways of sharing information include:

- Conversations or meetings with communities and/or their leaders
- Discussion groups
- Theater performances and puppet shows
- Radio announcements/discussions/skits
- Media releases
- Local newspaper articles
- Branded materials (e.g., water containers, blankets, tarpaulins, hygiene kits)
- Children's plays and learning activities
- At distributions of food and non-food items
- Wallet-sized reference cards with key messages and referral pathway numbers
- Banners
- On physical objects/infrastructure (for example, on water tanks)
- At community/religious centers
- At delivery points for health services and water
- Locally accessible social media
- Awareness-raising competitions
- By encouraging children to create their own ways of communicating key messages with their peers
- Phone/WhatsApp messages
- Tailored training sessions for key government and non-government humanitarian actors

# **Debrief**

- Teams will often share information in ways that have worked for them in the past; however, a copy/paste approach is not helpful in an emergency.
- Teams must understand the formats and methods that are already used in the community and the different groups that can access them. They should also understand if and how the emergency has affected their use.

# 5.7 WHEN TO SHARE INFORMATION, 10 MINUTES

#### **Group Exercise**

#### **Purpose**

Show that different information should be given at different points in a response

#### Process

**ASK** the groups to look at the timeline and then update their information-sharing plan by answering the following questions:

- What information do you think is needed at the different stages of an emergency?
- How does the type of emergency affect the type/flow of information?
- As a DRR actor, how do you think information-sharing before a disaster will help you reach vulnerable groups during a response?

**DISCUSS** responses in plenary. **ASK** the groups to stick their completed information-sharing plans on the wall.

**GIVE** each participant a copy of the *Information and Communications Questions in Rapid Needs Assessments* (HO 11) to read on their own time.

#### Debrief

- In rapid-onset emergencies, it can be difficult to develop an information-sharing strategy at the start of a response. It is important to think about an information-sharing plan in disaster contingency planning.
- Immediate life-saving information should be prioritized at the start of a response.
- As responses develop, information-sharing strategies should evolve and become more detailed.

# 5.8 REFLECTION ON DISASTER PREPAREDNESS, 20 MINUTES

#### Discussion

#### **Purpose**

Highlight the importance of early and structured information sharing in DRR work prior to disasters

#### **Process**

**DIVIDE** participants into new groups of 3–5 people.

**ASK** the groups to think about the information-sharing plans developed in the previous sessions and what these would look like for their project/context. They should discuss the following questions in groups for 5 minutes:

- What preparedness information do you think communities would need **before** a disaster that might save lives or reduce the impact? For example, what preparedness measures should be in place for households, evacuation information or early warning alerts.
- Given the challenges of communicating information during/after a disaster, how could information-sharing be improved so that it quickly reaches affected people—including the most vulnerable groups?
- How could different types of emergencies affect the information-sharing plan? For example, what would happen if the plan depends on sharing information by cell-phone, but a typhoon damages the phone network?

**DISCUSS** in plenary and write answers on a flipchart.

**HIGHLIGHT** that DRR actors can focus their planning and preparedness activities at the time of the year when seasonal hazards—such as floods—are less likely to happen.

#### **Debrief**

- It is important for DRR and local humanitarian actors to prepare structured informationsharing plans before an emergency hits.
- DRR actors should understand the needs of different groups and how they share and get information. It is also important to understand how different types of emergencies might change the plan(s) when changes are needed.

# 5.9 WRAP-UP, 5 MINUTES

# Presentation

- Different groups should understand the role of the organization and its work—including what services are available to them.
- Community members should receive information about the expected behavior of staff.
- Information should be shared through a range of communication methods that are appropriate to the needs of the community, especially for the most vulnerable and marginalized groups.
- It is important that DRR and local humanitarian actors share information with vulnerable groups early in a response.

# **Session 6: Feedback and Complaints**

## Time:

2 hours and 40 minutes

# Objectives:

- Participants understand the importance of feedback and complaints, and the need to respond to them
- Participants understand the basic steps of setting up a feedback mechanism

## Key Messages:

- Feedback and complaints are essential for DRR and humanitarian organizations to improve the quality of their programs, and to identify and stop any staff misconduct.
- People and communities affected by emergencies should be consulted on the design and implementation of feedback mechanisms.
- Implementing a system for managing feedback may be technical as it must be safe, appropriate and accessible to all groups. Some support may be needed.

#### Handouts:

- HO 12: Feedback Channels (one copy per participant)
- HO 13: Feedback Channel Pros and Cons (one copy per participant)
- HO 14: 12 Steps to Setting Up Complaints-Handling Mechanisms (one copy per participant)

## **Training Tools:**

- TT 10: Character and Feedback Cards (one copy)
- TT 11: Agree/Disagree Cards (one copy)

## Materials:

- Box
- Desk and chair
- Sign with phone number
- Flipchart and pens

## Online Resource:

■ CRS, CRS Feedback, Complaints and Response Mechanisms Guide. 2021.

## Preparation:

■ For the role-play: set up the box, desk and sign with the phone number; cut out the character and feedback cards

## 6.1 INTRODUCING FEEDBACK AND COMPLAINTS, 10 MINUTES

#### Presentation

## **Purpose**

Introduce participants to the Feedback and Complaints core component and give an overview of what it means, why it is important and how it helps enhance the safety, dignity and meaningful access of program participants

#### **Process**

**REFER** participants to their copy of the *Safe and Dignified Programming Framework* (HO 6). **READ** the definition of Feedback and Complaints and its indicators:

	What this means		Indicators
and t Complaints f Mechanisms r ii	to provide plaints feedback and	5.1	Diverse and vulnerable groups are consulted on appropriate, safe, confidential and context-specific channels for feedback and complaints, particularly those of a sensitive nature—including allegations of sexual exploitation and abuse, fraud and corruption.
		5.2	Diverse and vulnerable groups have access to and are fully aware of how to use complaints and feedback mechanisms; they understand how their complaints and feedback will be managed, as well as when to expect a response.
		5.3	Staff act on feedback and complaints in a timely, fair and appropriate manner that prioritizes the safety of complainants and those affected at all stages.
	5.4	Staff understand the management system in place for handling sensitive complaints—including the procedure to ensure access to necessary support for complainants, especially survivors of sexual exploitation and abuse.	
		5.5	Staff refer complaints that do not fall within the organization's scope to a relevant party.

**ASK** participants to share what "feedback" means and why it is important in disaster preparedness work.

**WRITE** their answers on a piece of flipchart paper and relate their examples to the definitions above. Use the following questions as prompts, if needed:

- Why is it important to receive feedback from the people we are supporting?
- How does collecting non-sensitive feedback about programs and sensitive complaints (for example, about staff conduct) enhance the safety, dignity and access of program participants?
- What happens if we receive a complaint but don't do anything about it?

**EMPHASIZE** that this session is *not* a comprehensive training on feedback mechanisms. It is intended as an introduction to the concepts and importance of these systems in Safe and Dignified Programming. Technical assistance may be needed to design a feedback mechanism.

#### 6.2 FEEDBACK AND COMPLAINTS ROLE-PLAY, 30 MINUTES

## **Group Exercise**

#### **Purpose**

Highlight some of the issues with feedback mechanisms

#### **Process**

**PREPARE** three example feedback channels:

#### ■ Box with slit in top

- Put a box somewhere in the room where everyone can see it (no privacy).
- The box should not have any information on it.
- Do not leave any pens or paper near it.

#### ■ Information kiosk

- Place a desk somewhere in the room.
- Someone should sit at this desk (ideally, one of the facilitators) and not be very helpful, only talking to "important" people.
- Do not give any information about what/who it is for.

#### Hotline

 Put up a sign with just a phone number (ideally, a non-local number) that no one will answer. This could be the facilitator's own phone number so that participants do not call an unsuspecting stranger.

**GIVE** each participant one character card and one feedback card from *Character and Feedback Cards* (TT 10).

**EXPLAIN** that the participants should imagine they are that character and that they have a piece of feedback or a complaint that they want to share with program staff.

**EXPLAIN** that there are three different feedback channels available to use today. Do not give details about how they can be used.

**ASK** participants to make their feedback or complaint using each of the three channels, role-playing as their character as accurately as they can.

**GIVE** them about 15 minutes to give the feedback or complaint; when everyone has tried to use each channel (or as many as possible), stop the exercise and invite people to clear up the room together.

#### In plenary, ASK:

- Who were your characters, and what sort of feedback did you want to give?
  - There are likely to be comments about the range of characters and their roles in the community and relative power.
  - Many may have found the experience confusing and become frustrated with the process. They may have decided not to make their complaint through any of the channels because of the type of complaint.
- Did everyone try all three systems? Did they find them easy, safe or appropriate?
  - Suggestion box: Some characters could not read or write; there were no instructions
    on how to use the box; there were no pens or paper; some characters might be too
    embarrassed to use the box because there was no privacy; some did not know whether
    someone would read or respond to the feedback or whether they were safe using the
    box.
  - **Information kiosk:** The person on the desk was rude; staff prioritized more powerful people—such as the mayor; some people felt embarrassed talking in front of others.
  - **Hotline**: No one answered the number; some people did not have a phone; it was a foreign number, so some could not afford to call.

**EXPLAIN** that aspects of this role-play will be covered in the following exercises:

■ Choice of channel: In this role-play, we do not know whether people were consulted on the design and implementation of mechanisms. None of the options are appropriate or safe. People and communities should be involved in their design, as the channels need to be trusted, familiar and easy-to-use.

- Improving the existing channels: In this role-play, the existing channels could be improved:
  - Suggestion box: Display instructions on its use; leave pens and paper by the box; leave the box in a better location that everyone can access.
  - Information kiosk: Train staff; place the kiosk in a private place; make sure female and male staff are at the kiosk.
  - Hotline: Use a local number; check whether people—including vulnerable people—have access to a cellphone before choosing this system; train staff to answer the hotline
- **Sensitive complaints:** In the role-play, there was no easy way to report sensitive issues.

#### **Debrief**

- Affected communities can become very frustrated when there are no feedback mechanisms or when they are badly designed.
- There are pros and cons to different channels. Staff need to think about what kind of information they want to collect, who will use the system, what resources they will need and how they will respond to information received.
- The involvement of diverse groups in the design of feedback mechanisms will make them more appropriate to their context. This makes it more likely they will be used and trusted.
- The role of staff in feedback mechanisms is crucial. Even if a good system is in place, staff need to understand the importance of receiving feedback and be trained on how to receive and manage it.

#### 6.3 GOALS OF FEEDBACK MECHANISMS, 10 MINUTES

#### Presentation

#### **Purpose**

Present the different goals of feedback mechanisms

#### **Process**

**EXPLAIN** that feedback mechanisms in DRR and humanitarian settings have two main objectives:

- Improving program quality and service delivery. All contexts and communities are different and evolve with time, so feedback from program participants helps programs adapt and improve by:
  - Contributing to timely learning. Feedback mechanisms are open to everyone, not limited to one topic, and can be used at any moment. Feedback comes directly from program participants and gives organizations very valuable information.
  - Using learning in decision making. All information received from feedback mechanisms should be documented for learning as it can lead to immediate changes in programming (for example, changing the day or time of a distribution) or longer-term changes.
- Enhancing the safety and dignity of communities. Feedback contributes to program participants' safety and dignity by:
  - *Preventing harm.* Program participants can report any risks created or increased by the programming.
  - Stopping harm. The organization can act to stop or reduce any harm that is reported.

#### **Debrief**

- Feedback can encourage the participation of affected populations in programs and help improve acceptance and security. It can also help organizations understand participants' expectations.
- Organizations can use feedback to identify potential/current/past sources of harm/abuse.
- Information from feedback mechanisms can inform future programming. It may help organizations target the most vulnerable people and improve the quality of programming.

## 6.4 AGREE OR DISAGREE GAME, 15 MINUTES

## **Group Exercise**

#### **Purpose**

Clarify the meaning of "feedback" and "complaints"

#### **Process**

**STICK** the two *Agree/Disagree Labels* (TT 11) on opposite ends of the room.

**ASK** all participants to gather in the middle of the room.

## **EXPLAIN** the rules of the game:

- Some statements can be shown on flipchart paper. Participants should move to one end of the room depending on whether they agree or disagree with the statement.
- When all participants have chosen their answer, one or two people from each (if applicable) will be asked to explain why they agree or disagree.
- You will then give them the right answer and have a brief discussion.

#### Statements, answers and additional information are:

- Feedback is any information we receive from program participants. **DISAGREE** 
  - Feedback is any information from program participants/communities to the organization about how satisfied they are with the assistance they have received.
  - This can include feedback on whether they are satisfied with the type of assistance they have received or how they received it.
  - Staff receive a lot of information from people and communities, but not all of it will be about their satisfaction with the assistance.
  - Feedback can be received through specific assessments (e.g., group discussions or interviews), post-distribution surveys, questionnaires or other formal systems. These can be one-way.
  - Feedback can and should also be received informally through daily interactions
    between program staff and program participants. Formal and informal feedback should
    be triangulated. It is important to use this information, as it can help develop trust and
    improve programs on an ongoing basis.

#### ■ A complaint can only be negative. **AGREE**

- Complaints are specific grievances from anyone who has been negatively affected by an organization's action or who believes that an organization has failed to meet a stated commitment.
- Complaints can alert organizations to serious misconduct or failures in the response. A complaint is therefore always negative and should always receive a response.

#### ■ We can ignore certain feedback. AGREE and DISAGREE

- An important principle is to "close the loop," which means that ideally, all feedback should receive a response.
- A response can be an "answer" (e.g., thanking someone for a suggestion or answering a question) or an "action" (e.g., reprinting a registration card that has been lost).
- However, responding to every piece of feedback can be difficult. If an organization receives many anonymous comments about how great their assistance is, this is nice to know, but a response is not needed.
- Some feedback is not valid (e.g., feedback that is not about the organization's
  programs, staff or partners) and is usually interesting only for learning. For example, if
  you receive a lot of this type of feedback, it may mean that program participants do not
  clearly understand the purpose of the feedback mechanism or what programs for
  which your organization is responsible.

#### Sensitive and non-sensitive complaints should be handled differently. AGREE

 "Sensitive complaints" include complaints about corruption, exploitation, abuse, misconduct, negligence or other abusive, illegal or reputation-damaging behavior by staff, volunteers or affiliates. They should be handled urgently and confidentially by senior staff.  "Non-sensitive complaints" relate to program issues that should be addressed by program staff. These could include people not being on selection lists, items missing from distributions or delays in project activities.

#### **Debrief**

- Feedback and complaints mechanisms are crucial because they can help staff understand whether the right assistance is reaching the right people in the right way.
- They can also flag any serious protection or safeguarding issues.

## **6.5 SHOCK-RESPONSIVE CHANNELS, 30 MINUTES**

# Presentation and Pair Work

#### **Purpose**

Highlight the importance of considering the DRR landscape and the impact of disasters on feedback mechanisms

#### **Process**

**EXPLAIN** that no one feedback channel will suit everyone. A mix of channels is needed so that all members of the community—regardless of sex, gender, age, disability or other diversity factors—can access at least one. These are the three types of recommended channels:

- Face-to-face. There is almost always a preference for one face-to-face channel (e.g., community meetings, help desks, household visits).
- **Active**. Ask people specific things—such as during post-distribution monitoring.
- Static. This can be used at any time by the community (e.g., hotline, suggestion box).

GIVE each participant a copy of Feedback Channels (HO 12) to read.

**ASK** participants to work in pairs and imagine that a natural disaster has happened (give an example, if helpful).

**ASK** them to discuss each channel and answer the following questions:

- Which channel would be more vulnerable in the disaster? Which would be more resilient?
- How do you think access to each channel might change during a disaster?
- Who would find it difficult to access each channel?
- How do you think the channel could be adapted to make it more resilient to shocks?

**ASK** participants if there are other factors that DRR and humanitarian actors should think about when setting up a feedback mechanism. [Where relevant, **ASK** government participants what feedback mechanisms they have in place and how local DRR and humanitarian actors can support them.]

**GIVE** each participant a copy of *Feedback Channel Pros and Cons* (HO 13) and ask them to read it on their own time.

**HIGHLIGHT** the need for DRR organizations to understand:

- How vulnerable the feedback channels are in disaster events.
- Existing government feedback mechanisms for protection and shock-related information. In some contexts, there will be a government "assistance helpline" for reporting child protection or gender-based violence. It is important for local DRR and humanitarian actors to understand if these exist, whether or not they work well, and how the organization could expand on them in a disaster-resilient way.

#### **Debrief**

In plenary, **HIGHLIGHT** the need for DRR and humanitarian actors to:

- Understand disaster events and how they affect people's access to feedback channels.
- Analyze community information-sharing culture, including whether people feel able to complain and what methods they prefer to use.
- Adapt the feedback mechanisms based on the risk of different types of shock. There should be multiple channels in case any are disrupted in a disaster.

#### 6.6 THE 12 STEPS FOR HANDLING COMPLAINTS, 60 MINUTES

#### **Group Exercise**

#### **Purpose**

Enable participants to plan a complaint-handling process

#### Process

**SHOW** on a PowerPoint or flipchart these *12 Steps for Handling Complaints,* and first outline what **Steps 1–5** mean:

- **1. Commitment/support by senior management.** Ensure management understand and are committed to the implementation of the complaint mechanism.
- **2. Consult program participants, host communities and other stakeholders.** Ensure potential users are involved in discussions about the design and location of the mechanism.
- **3. Develop policy based on community input and program resources.** Consider how the mechanism will work and who has oversight.
- **4. Staff training on complaint handling**. Train staff on how the mechanism will work, and their roles and responsibilities.
- **5. Sensitize the community on the complaint-handling process.** Provide the community with information on how to use the mechanism, its purpose and limitations, how it works and who is responsible.

**EXPLAIN** that **Steps 6–12** relate to processes that ensure that complaints are properly dealt with. These are actionable steps:

#### 6. Receive feedback and complaints.

- Complaints are received by whatever mechanism the organization has in place.
- Ideally, complaints should include information about what the complaint is, who it relates to, and when, where and how the complainant can be contacted.

#### 7. Log and acknowledge.

- Check that the complaint is valid (i.e., within the control of the organization).
- If the complaint is valid, log the details in a central filing system. Decide whether it is sensitive or not and pass it to the relevant person or team for investigation. Contact the complainant to acknowledge the complaint.
- If the complaint is not valid, contact the complainant and try to help them by referring them to another organization.

#### 8. Consult, review and investigate.

- All complaints need to be reviewed, but not all require a formal investigation.
- Non-sensitive complaints should be dealt with by the program team with support from the "Complaints Manager" or their equivalent (if the organization has one).
- Sensitive complaints should be dealt with by someone with the right expertise; for example, a Human Resources Manager for cases of abuse or misconduct and a Finance Manager for cases of fraud or misuse of funds.
- There needs to be a decision about whether an allegation relates to a criminal offence that may need to be referred to the authorities (depending on the context).
- If participants need more details about the investigation process, refer them to the Core Humanitarian Standard (CHS) Alliance guidelines.<sup>9</sup>
- **9. Respond to complainant.** Contact complainant and explain the outcome of the complaint and what action will be taken (if any). If there is a need for specific action, it will be one of three types: "practice change" (i.e., a decision to change ways of working in the future), "making good" (i.e., replacing products that were not fit for the intended purpose) and "restitution" (i.e., compensation in an extreme case where it is not possible to "make good").
- 10. Opportunity to appeal the decision. Complainants have a right to appeal any decisions.
- **11.** Review complaint trends, report to management and adjust program accordingly. Monitoring and reporting on complaints can help the management team identify opportunities for improvement at project/program/organizational levels.
- **12.** Review effectiveness of complaint system and make adjustment(s). Complaint systems should not be static. Changes in the context may mean that other methods might be better (e.g., because phone infrastructure has been reconnected).

<sup>&</sup>lt;sup>9</sup> CHS Alliance. <u>Guidelines for Investigations: A guide for humanitarian organizations on receiving and investigating allegations of abuse, exploitation, fraud or corruption by their own staff.</u> 2015.

**DIVIDE** participants into groups according to their organization/team and give each group a copy of *12 Steps to Setting Up Complaint-Handling Mechanisms* (HO 14).

**ASK** each group to look at the 12 steps and fill out the sheet in the appropriate place based on the following questions:

- What is the status of this step in your organization?
- What are the gaps/challenges in meeting this step?
- What are the next steps/actions in relation to this step?

**ASK** the groups to present their work in plenary. If not raised by participants, mention the additional issues below:

- Information. How will you engage different stakeholders?
- Culture. Is there a "culture of complaining" in your context?
- **Terminology and language.** Is "complaint" a sensitive word in the local language?
- Context. What kind of disasters are common and how could they affect the feedback mechanism?
- **Accessibility.** What are the safe ways and formats for different people to make complaints (written, oral, formal, informal)? During disasters, how does access change?
- **Location.** Where would the channels be best placed, considering potential shocks?
- Trusted system. Who do people prefer to talk to?
- Communication methods. What communication methods are preferred by users? In plenary, **HIGHLIGHT** any common challenges or suggestion solutions raised by the different teams.

#### **Debrief**

- All DRR and humanitarian actors must have feedback and complaints mechanisms.
- These must be realistic in light of the financial and human resources available.
- **EXPLAIN** that CRS has a <u>comprehensive toolkit for feedback mechanisms</u>. **EXPLAIN** that this training is part of the PrEPD Toolkit, which also includes tools to guide local DRR actors to create feedback mechanisms.

# 6.7 WRAP-UP DAY 2, 5 MINUTES

#### Presentation

**SHOW** a flipchart with the key messages from Session 6 to wrap up.

**EXPLAIN** that Day 3 will focus on the remaining components of Safe and Dignified Programming.

**ASK** participants to give feedback on sticky notes for Day 2 and put them in the suggestion box.

ANSWER any questions in the Car Park.

## **Session 7: Staff Conduct**

#### Time:

3 hours and 15 minutes

## Objective:

■ Participants understand the importance of having good staff who are supported and well-trained

## Key Messages:

- Individuals are responsible for their own behavior, but organizations have a key role to play in preventing sexual exploitation and other forms of abuse. Ignoring these obligations can have serious consequences.
- It is important for individuals and organizations to recognize, promote and encourage positive behavior and ways of dealing with stress.

#### Handout:

■ HO 15: IASC Six Rules

# **Training Tools:**

- <u>IT 12</u>: Sexual Exploitation and Abuse Scenarios (four copies)
- <u>IT 13</u>: Examples of Code of Conduct Breaches (four copies)

#### Materials:

- Vouchers (sticky notes or pieces of paper)
- Flipchart and pens
- Online resources
- To Serve with Pride video<sup>10</sup>

#### Preparation:

- For the role-play: Cut out ten pieces of paper and write "voucher" on them; choose a facilitator to play the second role
- Cut out the sexual exploitation and abuse scenarios
- Cut out the examples of Code of Conduct breaches

7.1 WELCOME TO DAY 3 AND RECAP OF DAY 2, 10 MINUTES									
Discussion	WELCOME participants to the third day of the training.								
	SHARE any feedback from Day 2 and any changes made as a result of that feedback.								
	<b>REMIND</b> everyone how they can give feedback.								
	ASK participants to think back to Day 2 and share:  ■ One thing they learned								
	One thing they found surprising								

<sup>&</sup>lt;sup>10</sup> Other languages are available: Arabic/Chinese/French/Russian/Spanish.

#### 7.2 BAD DISTRIBUTION ROLE-PLAY, 30 MINUTES

## Group Exercise

#### **Purpose**

Highlight the importance of having good staff who are supported and well-trained

#### **Preparation**

Before the session starts, **CHOOSE** another facilitator to play the second role in the role-play.

**ASSIGN** roles between the facilitators:

- One facilitator oversees the vouchers.
- The other facilitator oversees the chairs (or other items).

**CHOOSE** five volunteers who will participate in the role-play.

**EXPLAIN** what will happen in the role-play and the discussion points that will be covered in plenary.

#### **Process**

**PLACE** five chairs at the front of the room. *NOTE*: If no chairs are available, use other items as stand-ins (for example pens, fruit, notebooks). Prepare 10 vouchers (pieces of paper) for the activity.

**INVITE** the five volunteer participants to come to the front of the room or facilitation space.

**ASK** the rest of the participants to watch the role-play and reflect on how it relates to the previous day's discussion about safety, access and dignity.

**ASK** the participants to line up and face the audience. This way the audience can see and hear what the facilitators and participants are saying.

**SPEAK** clearly and loudly and **NARRATE** when needed to make sure that the audience understands what is being said.

**ROLE-PLAY** as follows:

#### Facilitator 1

"I can see that you have suffered a lot lately. I am here to help you. I have seen that you have no chairs [or other items], so I have vouchers you can use to get chairs. You are free to ask questions. Please come one at a time to get the vouchers, then you should trade in your vouchers for chairs."

**ASK** the five participants to come forward and line up.

**DEMONSTRATE** inappropriate, disrespectful behavior to each of the five participants.

**ENSURE** that the behavior and exchanges are clear for the audience watching and **NARRATE** when needed.

**CHANGE** which behaviors you use and the order you use them based on the context and participants. The below examples are only a guide and can be adapted:

- **Participant 1**: Give the participant one voucher. Ask for money in exchange for a second voucher. If they agree, tell them you will give them an extra voucher. If they refuse, say that they will not receive another voucher. Tell them not to tell anyone else about the request for money or you will make sure that they do not get a chair.
- Participant 2: Wink at the participant or demonstrate favoritism (for example, complimenting them). Give them two vouchers and ask them to give you their personal phone number, as you would like to call them later and visit them at home that evening.
- Participant 3: Tell the participant that you know their uncle and that he is a good family friend. Give them three vouchers.
- Participant 4: Give the participant one voucher. Tell them that they will get two vouchers if they go buy goods for you at the market (give an example of a good based on context). Tell them that this needs to be a secret and not to tell anyone.
- Participant 5: Tell them that you do not think they should be in the program and that you are running low on vouchers. Refuse to give the participant a voucher, explaining that they can get one next time.

#### 7.2 BAD DISTRIBUTION ROLE-PLAY, 30 MINUTES

#### ...continued

If any participants ask questions, **DEMONSTRATE** inappropriate behavior (ignore them, speak to them in a different language, turn your back on them).

Once participants have received vouchers, **EXPLAIN** that they should go to **Facilitator 2** to get their chairs.

#### Facilitator 2

**ASK** participants to line up to get their chairs one-by-one, ensuring they are facing the audience so they can see and hear what the facilitators and participants are saying.

**SPEAK** clearly and loudly and **NARRATE** when needed to make sure that the audience hears and understands what is being said.

**DEMONSTRATE** inappropriate behavior. Change which behaviors you use and the order in which you use them based on the context and participants. The below examples are only a guide and can be adapted:

- **Participant 1:** Offer a chair to the participant in exchange for a date. If they refuse, tell them you will not give them a chair. If they agree, tell them you will give them two chairs.
- Participant 2: Tell them that you will only give them the chairs at their home, and you will visit them later at their house. Refuse to give them a chair and ask them to tell you where they live.
- Participant 3: Give the participant one chair for three vouchers and ask them to give you money with their next vouchers to get more chairs. Tell them that if they tell anyone about your request, you will take away their chair.
- Participant 4: Tell the participant that their voucher is only valid if they buy you alcohol. Give them one chair and tell them to come back with the alcohol. Tell them they should not tell anyone about your request.
- Participant 5 (did not receive a voucher): Tell them that there are no more chairs left and to leave the distribution. Tell them you cannot help them. Ignore them if they ask questions.

**TELL** participants that if they are unhappy because some of them now have one chair but others have none, they should work it out between themselves and exchange what they have

After the role-play, **ASK** participants to return to their seats and **THANK** those who have taken part.

**DISCUSS** the role-play in plenary, using these questions as a guide:

- How did you feel about the behavior of the staff? Thinking about safety and dignity, what behavior was inappropriate? What behavior caused harm?
- Did the staff give any free assistance?
- Did staff ask for anything in exchange?
- Did the staff allow participants to ask questions or complain?
- Did the staff give information about who should get a chair and how many should be given?

**EXPLAIN** that abuse of power by staff providing services is always unacceptable.

The role-play showed many problems with staff behavior and abuse of power. **EXPLAIN** that safeguarding means protecting community members from harm and the abuse of power by organizations and local government.

#### **Debrief**

- Inappropriate behavior and abuse of power by staff providing services—including asking for favors in exchange for assistance—is never acceptable.
- Organizations and local governments must protect community members against the abuse of power and inappropriate behavior by staff.

#### 7.3 INTRODUCING STAFF CONDUCT, 10 MINUTES

# Presentation and Discussion

#### **Purpose**

Introduce participants to the Staff Conduct core component and give an overview of what it means, why it is important and how it helps enhance the safety, dignity and meaningful access of program participants

#### **Process**

**REFER** participants to their copy of the *Safe and Dignified Programming Framework* (HO 6). **READ** the definition of Staff Conduct and its indicators:

	What this means		Indicators
Staff Conduct	Staff have appropriate knowledge and sufficient organizational	6.1	Staff* have signed and understand the organization's Code of Conduct and relevant safeguarding/protection policies and are aware of their rights and responsibilities. 11
	support to conduct themselves and their work in a safe and appropriate way.	6.2	Field staff can be easily identified, and there is adequate representation of women and other diverse groups.
		6.3	All staff have clear roles and responsibilities and are supervised.
		6.4	All aspects of staff wellbeing are considered, and staff have access to additional support if required.

<sup>\*&</sup>quot;Staff" are any designated representatives of the organization—including national, international, permanent or short-term employees, as well as volunteers and consultants (Core Humanitarian Standard).

**ASK** participants to share what they think "good staff conduct" means and why they think it is important for ensuring the safety, dignity and access of program participants.

**WRITE** their answers on a piece of flipchart paper, relating their examples to the definition of staff conduct and the indicators, as above. Use the following questions as prompts, if needed:

- Why is it important to ensure good staff conduct?
- How can diversity and gender balance on teams enhance the safety, dignity and access of program participants?

<sup>11</sup> For example, these could include policies on safeguarding, prevention of sexual exploitation and abuse, complaints handling and whistleblowing, etc.

#### 7.4 TO SERVE WITH PRIDE VIDEO, 30 MINUTES

#### Video

#### **Purpose**

Show the importance of having systems and procedures to prevent and respond to sexual exploitation and abuse by staff

#### **Process**

**EXPLAIN** that you will show a video that some people may find difficult to watch, particularly staff who have worked in or come from the contexts included.

**DO NOT** insist on people participating in the discussion and avoid putting anyone on the spot. They are free to leave the room if they prefer. Promote a quiet, reflective atmosphere as participants share their reactions and experiences.

SHOW the To Serve with Pride video<sup>12</sup> (stop at 17:00).

In plenary, ASK:

- What are your initial thoughts about the video?
- What are the key messages of the video?
- What recommendations does the video make?

**EXPLAIN** how acts of sexual exploitation and abuse can impact individuals and communities and can cause serious harm.

- This includes the physical, mental and emotional consequences experienced by survivors, which can be traumatic and long-lasting.
- There are also consequences for the community, the perpetrator, the organization and any children born as a result of sexual exploitation and abuse.

**EXPLAIN** that, as seen in previous exercises and the video, misconduct does not only refer to sexual exploitation. Other examples of exploitation and abuse include:

- Staff favoring program participants from their own community or religious or ethnic group
- Stealing and/or reselling goods intended for program participants
- Deliberately preventing aid from reaching a particular group
- Staff raising their voice or being violent with program participants
- Such acts can have a negative impact on the safety, dignity and meaningful access of program participants.

## **Debrief**

- We should not assume humanitarian and DRR organizations are free of sexual exploitation and abuse.
- Sexual and other exploitation and abuse have serious impacts on individuals and communities.
- Sexual exploitation and abuse have a major impact on the reputation of NGOs and other organizations, especially when they do not respond.
- Organizations need safe recruitment, protection policies and staff training.
- As we have seen with the Feedback and Complaints core component, there is a need for well-designed complaint mechanisms.

<sup>12</sup> Other language versions available. Arabic /Chinese/French/Russian/Spanish.

#### 7.5 THE DIFFERENCE BETWEEN SEXUAL EXPLOITATION AND ABUSE (OPTIONAL), 25 MINUTES

#### **Exercise**

#### **Purpose**

Learn what actions and behaviors constitute sexual exploitation and abuse.

#### **Process**

#### **EXPLAIN** that:

- Sexual abuse is any actual or threatened physical intrusion of a sexual nature. This can be through force or under unequal or coercive conditions.
- Sexual exploitation is any actual or attempted abuse of a position of vulnerability, differential power or trust for sexual purposes. This includes, but is not limited to, gaining financially, socially or politically from the sexual exploitation of another person.

**DIVIDE** participants into four groups.

**GIVE** each group a copy of *Sexual Exploitation and Abuse Scenarios* (TT 12).

**ASK** each group to decide whether each scenario is an example of exploitation or abuse. Allow 10-15 minutes for discussion.

After the exercise, **ASK** each group in turn to give their answer for each scenario (the correct answers are given below under **Trainer's notes**).

**REFER** to each of the examples and link them to the correct definitions of either sexual abuse or exploitation. Allow time for questions under each scenario to clarify the distinction between abuse and exploitation.

**EXPLAIN** prevention of sexual exploitation and abuse (PSEA). This is the term used by the UN and the NGO community to refer to measures taken to protect vulnerable people from sexual exploitation and abuse by their own staff and associated personnel.

#### **Trainer's notes**

The answers are:

- **Sexual exploitation:** Questions 2, 3, 5. (*NOTE on scenario 5:* even if the young man refuses to have sex with her, if she tries to abuse her position by making this request, she is guilty of sexual exploitation.)
- **Sexual abuse:** Questions 1, 4, 6.

#### **Debrief**

- Incidents of sexual exploitation and abuse by local DRR and humanitarian workers represent gross misconduct and a failure to protect those we aim to serve.
- Preventing sexual exploitation and abuse is the collective responsibility of all humanitarian actors.
- Organizational policies and procedures need to address incidents of abuse and exploitation. It is also important to promote a safe organizational culture.
- DRR and humanitarian actors are always in a position of power in relation to the communities with whom we work.
- Consent does not justify behaviors that could allow sexual exploitation and abuse.
- Organizations and staff should adopt a zero-tolerance approach to sexual exploitation and abuse. Staff who observe or hear about misconduct must be supported to report their concerns. This means having confidential reporting systems.

#### 7.6 CODE OF CONDUCT, 30 MINUTES

# Presentation and Group Work

#### **Purpose**

Demonstrate the importance of a Code of Conduct as a key part of safeguarding policy

#### **Process**

**SHARE** with the participants that a Code of Conduct is an inclusive part of an organization's safeguarding policy. It should apply to all staff, volunteers and affiliates at all times.

**ASK** participants who work in DRR whether their organization has a Code of Conduct. **ASK** them to share what it includes, writing their answers on a flipchart.

GIVE each participant a copy of the IASC Six Rules handout (HO 15).

**EXPLAIN** that the IASC (Inter-Agency Standing Committee) is a UN humanitarian coordination forum, and it created these rules to prevent sexual exploitation and abuse. They apply to anyone working in disaster preparedness and humanitarian response.

**STRESS** that all staff should sign a Code of Conduct. All staff need to understand its purpose, the type of behaviors it covers and any disciplinary measures it includes. Every Code of Conduct should contain the IASC's Six Rules, at a minimum. The Code of Conduct serves two main purposes:

- To safeguard program participants from staff misconduct
- To protect staff from false allegations

**SPLIT** participants into four groups.

**GIVE** each group one of the cut-out slips from *Examples of Code of Conduct Breaches* ( $\top \Box 13$ ).

- Ask the groups to identify breaches of the Six Rules.
- After 15 minutes, in plenary, **ASK** each group to share their thoughts, answering the following questions:
- Have the Six Rules been breached? If so, which rule(s) have been broken?
- What would your first step be?

**REVIEW** the answers using the explanations below for each scenario and offer clarifications if needed:

- A male team member comments on a "pretty girl" during a fire drill.
  - Breach of Code of Conduct obligation "to create and maintain an environment that prevents sexual exploitation and abuse"
  - Demonstrates degrading and humiliating behavior
  - Report behavior to human resources (HR) or management
- There are rumors of a staff member adding the name of his girlfriend to the list of program participants.
  - Breach of Code of Conduct: Improper use of rank or position
  - Report to HR or management
- A program participant in your DRR preparedness project is told she must have sex with a contracted vendor in order to get her home repaired.
  - Anyone contracted by the organization is considered staff and must follow the Code of Conduct; this implies a breach for sexual exploitation as gross misconduct
  - Breach of the Code of Conduct: Exchange of goods or services for sexual purposes
  - Report behavior to HR or management
- A male volunteer meets a 16-year-old female program participant in a bar for a drink and takes her to his house for sexual intercourse.
  - Breach of the Code of Conduct: Performing sexual acts with children (anyone under the age of 18, regardless of the local age of consent)
  - Breach of the Code of Conduct obligation "to create and maintain an environment that prevents sexual exploitation and abuse"
  - Report behavior to HR or management

**HIGHLIGHT** that there is a power dynamic in relationships where workers—the staff of any DRR or humanitarian organization—are in the position of power providing for the vital needs of communities. This power imbalance is at the core of sexual exploitation and abuse.

#### **Debrief**

- Not reporting a suspicion of sexual exploitation or abuse is misconduct.
- All incidents or suspicions should be immediately reported through designated reporting channels. These can include HR, PSEA focal points, whistleblowing hotlines or managers.

#### 7.7 CODE OF CONDUCT QUIZ, 25 MINUTES

#### Quiz

#### **Purpose**

Highlight key components of a Code of Conduct and how they are used

#### **Process**

**SPLIT** participants into two teams.

**EXPLAIN** that each team will need to write down the correct answer to five questions on a piece of paper. The first team to hold up the correct answer gets a point.

**SHOW** a flipchart with these questions, then **ASK** in plenary:

- Why is a Code of Conduct necessary for staff of organizations?
  - To protect community members from staff abuse
  - To make sure staff understand the consequences of misconduct
  - To address ethical issues
  - All the above
- To whom should a Code of Conduct apply?
  - Only employees with signed contracts
  - Volunteers
  - All staff, volunteers and associates at all times
  - Staff of local governments

For this question, explain that a Code of Conduct should apply not only to the staff of an organization. Any person, business, organization or partner associated with the organization must also follow these rules. For example, if an organization hires a construction company to build shelters, and someone working for the company abuses a community member, they have broken the Code of Conduct. If a volunteer working for an organization exploits a program participant, they have broken the Code of Conduct.

- If a staff member sees or suspects that someone broke the rules of the Code of Conduct, they should:
  - Investigate to make sure their suspicion is well-grounded
  - Not get involved because other staff members are responsible for these issues
  - Share their suspicion with trusted colleagues
  - None of the above

For this question, offer clarifications for each wrong answer: Staff should NEVER investigate a situation themselves. Instead, they should immediately report what they have seen or heard, even if it is just a rumor. Staff should NOT share or spread rumors of misconduct. That is breaking the rule of confidentiality (limiting how many people know about a sensitive issue) and puts people at risk.

- What is the disciplinary measure mentioned in the IASC Six Rules for staff who breach the rules?
  - Being fired
  - Warning letter
  - Unpaid suspension from work for 6 months
  - Mandatory PSEA refresher course
- When does the Code of Conduct apply?
  - When staff are working directly with community members

- In emergency responses
- During office hours
- At all times

**EXPLAIN** that previous sessions on sharing information raised the importance of sharing expected staff behaviors with community members. This helps them understand their rights. It also helps them understand if they have been mistreated and what to do next. Staff should share this information with community members to protect them against abuse by staff of organizations and local government.

# 7.8 WRAP-UP, 5 MINUTES

Presentation

**SHOW** a flipchart with the key messages from Session 7 to wrap up.

# **Session 8: Mapping and Referrals**

#### Time:

2 hours and 30 minutes

## Objectives:

- Participants understand why it is important for DRR and humanitarian organizations to use existing referral pathways
- Participants understand how to orient people and communities toward services they need

# Key Messages:

- Only organizations with special mandates or trained human rights or protection monitors should monitor and report human rights abuses or other protection incidents.
- DRR and humanitarian actors may map protection services and develop referral pathways if they do not exist. They should document referral pathways and contact details for specialist medical, legal, psychosocial and protection services. They should update this information on a regular basis and share it with staff.

### Handout:

■ HO 16: Developing a Referral Pathway for Essential Protection Services (one copy per participant)

# **Training Tool:**

■ TT 14: Referral Web Nametags (one copy)

#### Materials:

- Ball of string
- Flipchart and pens

#### 8.1 INTRODUCING MAPPING AND REFERRAL, 10 MINUTES

#### Presentation

#### **Purpose**

Introduce participants to the Mapping and Referral core component and give an overview of what it means, why it is important and how it helps enhance the safety, dignity and meaningful access of program participants

#### **Process**

**REFER** participants to their copy of the *Safe and Dignified Programming Framework* (HO 6). **READ** the definition of Mapping and Referral and its indicators:

	WHAT THIS MEANS		INDICATORS
Mapping and Referral	Staff have the necessary knowledge, information and training to support people and communities	7.1	Staff regularly map existing protection services and how to contact them.
	in accessing existing services.	7.2	Staff share information on available services, as appropriate.
		7.3	Staff are trained when and how to refer cases.

In plenary, **ASK** participants questions about mapping and referral, for example:

- Can you give examples of when you have mapped services?
- What is a referral pathway? Have you ever oriented someone toward a specialized service?
- Why might mapping services be important, especially in preparing for and responding to emergencies?

If necessary, use the following definitions to **EXPLAIN** what referral of protection cases is:

- Mapping protection actors and services. This means finding all relevant protection actors in each area. This can include services that governments, NGOs and community-based and other civil society organizations offer. In some situations, the Protection Cluster or government will already have done this mapping. Where mapping does not already exist, DRR and humanitarian actors should collect the information, ideally with help from a local protection actor.
- Developing a referral pathway to orient people toward the services they need. A referral pathway is a document that shows organizations and program participants how to access essential protection services. It tells them where to go and who to contact for help with a specific protection need. This information can be shared widely.
- Making a protection referral. This means referring at-risk or vulnerable people to the right protection actors identified during mapping. Trained staff accompany people with protection needs throughout the referrals process so they can receive the service they need and can access any other recommended services. This approach should not be taken without specific case management and protection expertise.

**ASK** participants to share their general experiences (but not to disclose any sensitive or specific information about cases). If there are no relevant responses, use the following questions to guide the discussion:

- Have you ever heard rumors or witnessed incidents of abuse or exploitation in communities where you worked?
- How did you respond?
- Did you know what to do or what services and support may exist for those affected?

**WRITE** their answers on flipchart paper and relate their examples to the definition and indicators for mapping and referral, as above.

#### **Trainer's notes**

Mapping and referrals as part of Safe and Dignified Programming does **NOT** mean setting up a formal referral mechanism or accompanying people with protection needs through the referral process. This is the responsibility of specialized protection organizations and the Protection Cluster.

We should use existing mappings and train staff on how to orient community members to those services. If mapping has not been done, organizations should compile a basic list of existing services. They can do this in coordination with communities, local authorities and other organizations.

#### **Debrief**

- It is crucial to understand and respond to protection risks that are made worse by emergencies.
- It is the responsibility of protection actors to provide specialized services for survivors of these protection risks. They should also map and develop referral pathways.
- DRR actors are not trained to do the work of protection actors. However, they should use existing referral pathways to orient people to specialized services. If referral pathways do not exist, they should develop a reliable, clear and timely referral pathway to orient people to those specialized providers.
- DRR actors should **NOT** set up formal referral mechanisms or accompany people with protection needs throughout the referral process without specialized training.

#### 8.2 REFERRAL WEB, 30 MINUTES

#### **Group Exercise**

#### **Purpose**

Highlight the importance of simple, accessible, confidential and respectful referral procedures

#### **Process**

**ASK** for ten volunteers who will role-play as characters who are likely to interact with a survivor in a humanitarian response.

**GIVE** each person one of the nametags from *Referral Web Nametags* (TT 14) and ask them to role-play as their character.

**ASK** the volunteers to sit in a circle with the chairs close together and facing each other.

**ASK** the remaining participants to stand outside the circle so that they can easily see the activity.

**EXPLAIN** that a ball of string or wool represents a 17-year-old girl who has survived a sexual assault. Give the ball to the volunteer with the "17-year-old girl" nametag.

**TELL** the volunteers that every time a new character becomes involved in the girl's story, they should throw the ball to that character. The new character must wind some of the string/wool around a finger and continue. *NOTE*: The ball does not need to go back to the girl after each visit.

#### **TELL** the story as follows:

- The GIRL goes to report the incident to the COMMUNITY LEADER.
- The community leader refers the girl to the **LOCAL NURSE**.
- The nurse sends the girl to the DOCTOR, who administers treatment and sends the girl back to the NURSE.
- The nurse then refers the girl to the **LOCAL COMMUNITY SERVICES WORKER**.
- The local community services worker gives emotional support but refers the girl to the **UNHCR COMMUNITY SERVICES OFFICER** for more assistance.
- The UNHCR Community Services Officer talks with the girl and discovers she wants to involve the police, so they refer the girl to the **UNHCR PROTECTION OFFICER**.
- The UNHCR Protection Officer meets the girl and refers her to the **POLICE OFFICER**.
- The police officer informs the girl that she needs to see a lawyer but must do this via the UNHCR PROTECTION OFFICER.
- The UNHCR Protection Officer refers the girl to a LAWYER.
- The lawyer refers the girl to the **COURT PROSECUTOR**.
- The prosecutor discusses the case with the lawyer and calls the doctor about the survivor to get some information about the medical examination. The doctor asks to see the girl again, because they forgot to examine something, so she is referred back to the **DOCTOR**.
- The doctor refers the girl to a **SOCIAL WORKER**.
- The social worker then refers the girl to the **POLICE OFFICER** to bring them some new information.
- The police officer refers the girl back to the **UNHCR PROTECTION OFFICER** to report the incident
- The UNHCR Protection Officer asks the girl some additional questions, but she has to talk with the **COMMUNITY LEADER** because she is confused about the original details of the incident.
- The community leader contacts the **PROSECUTOR** to find out the status of the case.

#### After reading the story, **ASK** the group:

- Was all of this helpful for the survivor?
- Could a situation like this happen where you work?
- What could have been done to avoid making this web of string?
- Imagine if the girl had reported her case to a staff member in your team. How would it have been handled?

**EXPLAIN** that survivors of gender-based violence often have to interact with a large number of people who are not well-trained or coordinated. This can be daunting and confusing to

survivors. It may discourage them from reporting incidents. This is also relevant to people who have been exposed to other forms of harm.

#### Debrief

- Survivors and those exposed to harm, abuse or exploitation should not be made to go through complex processes that involve too many people as this can cause harm.
- Organizations should have procedures that clearly outline how sensitive reports should be managed. This should include information about how to orient survivors to key services and how and when to maintain confidentiality.

#### 8.3 INDIVIDUAL AND COMMUNITY MAPPING, 15 MINUTES

#### **Group Work**

#### **Purpose**

Highlight the importance of mapping both formal and informal structures and services at a community level

#### **Process**

**DIVIDE** participants into groups of three or four.

ASK them to discuss

- What do people do when they face a protection threat during or after a disaster?
- Who do they go to for help?

In plenary, **SHOW** flipcharts with three concentric circles with a stick person at the center, or **DRAW** the circles on flipchart paper for each group.

#### **EXPLAIN** that:

- The inner circle represents the individual (survivor).
- The next circle represents those "closest" to the individual and to whom that person first turns for support or help (e.g., mother, brother, sister, father, friend).
- The next circle represents those "closer" to the individual and to whom the individual may go next for support or help (e.g., teacher, nurse, doctor, priest, community leader, women's group, midwife).
- The outer layer represents those who are "close" to the individual, who live in the community and who may have a more formal relationship with the individual (e.g., police, health clinic staff, lawyer, school staff).

#### Part A

**ASK** participants to think about specific examples of formal or informal actors for each of the different layers according to their local context. For example:

- Would parents, grandparents or siblings be included in the "closest" ring in that context? Would healthcare providers or education actors be considered a support in the "close" ring?
- Ideally, information about the organizations, individuals, government bodies in layers two ("closer") and three ("close") should be captured and correlated with the Protection Cluster on functioning services (for example, family tracing and reunification, health, psychosocial support, legal services, safety and security, socioeconomic support).

#### Part B

- Draw a line through the middle of all of the circles. Explain that the left half refers to "pre-disaster event" while the opposite implies "post-disaster event."
- Ask participants to place actors identified in Part A inside the circle and categorize them whether they play a key role in a "pre-disaster event" or "post-disaster event," or both.

#### **Debrief**

■ It is important for staff and DRR and humanitarian organizations to have information on the formal and informal support systems that exist.

Ideally, information about the organizations, individuals and government bodies in layers two ("closer") and three ("close") should be captured and correlated with the Protection Cluster on functioning services (e.g., family tracing and reunification, health, psychosocial support, legal services, safety and security and socioeconomic support).

#### 8.4 HOW TO DEVELOP A REFERRAL PATHWAY FOR ESSENTIAL SERVICES, 30 MINUTES

# Presentation and Group Work

#### **Purpose**

- Show participants how to develop a referral pathway to orient people toward specialized services
- Highlight the importance of understanding and preparing for protection risks that are made worse by emergencies and disasters

#### **Process**

**GIVE** each participant copy of *Developing a Referral Pathway for Essential Protection Services* (HO 16).

**EXPLAIN** that there are two key reasons for developing a referral pathway for DRR organizations:

- To address protection risks in the communities we serve
- To strengthen our safeguarding practices

More importantly, it is crucial to understand, prepare and respond to protection risks that are exacerbated by emergency situations and disasters.

**EXPLAIN** each of the steps in the handout. **ASK** the participants if they have any questions or steps that need clarifying.

**DIVIDE** participants into groups according to their organizations or teams.

**ASK** the groups to go through the *Tool 4 Referral Pathway Checklist* in <u>HO 16</u> and discuss whether their organization/team implements these actions.

**SUGGEST** they make a note where gaps are identified as these can be included as specific activities to be covered in Day 4's Action Planning stage.

#### Debrief

- It is critical for DRR and humanitarian actors to have updated referral pathways and be aware of available services to orient people to the specialized services they may need.
- It is important that the roles and responsibilities of staff and focal points are clear and that staff are trained on how referral processes work.
- Organizations must have internal procedures to ensure the confidentiality and storage of any personal or sensitive information received.

#### 8.5 DEVELOPING REFERRAL CARDS, 60 MINUTES

#### **Group Work**

#### **Purpose**

To help participants map existing services and develop referral cards that they can carry with them, if they have not yet been developed by another responsible actor.

#### **Process**

ASK participants to look at the Tool 3 Referral Card Template in HO 16.

**WRITE** the protection risks identified in Session 4.3: Bubble Analysis Part 1 on a piece of flipchart paper.

In plenary, **DISCUSS** the services that might be needed in response to these protection risks (e.g., medical, legal, psychosocial).

**GIVE** participants the following two examples of best practice:

- In Sierra Leone, a local partner contacted the Protection Cluster to ask for information on referral pathways in their program area. The Protection Cluster had recently updated the information. The partner's staff were then trained on the referral pathways, and the information from the cluster was printed on laminated cards and given to all staff. A refresher training was held a few months later to update the information and ensure all staff felt equipped to orient people to the relevant services.
- In South Sudan, a local partner was working in an area without any referral pathways. They contacted the Protection Cluster and lobbied them to set up a referral pathway for services for people affected by gender-based violence. The partner approached other protection actors to encourage them to set up referral pathways for other protection risks. In the meantime, the local partner brought in protection expertise from another organization to support them to map community-based supports and services for gender-based violence.

**DIVIDE** participants into groups according to their organizations or teams.

**ASK** the groups to develop their own referral cards by mapping actors and services using the *Tool 3 Template* in <u>HO 16</u>, writing their answers on the sheet. They should also refer to the informal services they mapped in Session 8.3: Individual and Community Mapping.

**EMPHASIZE** that some of the key services include:

- Health services
- Legal services
- Psychosocial and social services
- Mental health support
- Safety and security (including the police, if safe and appropriate)

### **Debrief**

- The Protection Cluster or other relevant authorities are responsible for developing referral pathways to specialized services and for ensuring these services are safe for people to use.
- Staff should be aware of existing referral pathways. Where there is no mapping, organizations can consider mapping out services and developing cards for staff to carry so they can orient people who may need services. This should only be done if services exist and there is some level of protection expertise available.
- For contexts in which there is insecurity or a lack of trust in service providers, people may have reservations about using services. It is important to consider aspects of safety, access and dignity for the affected population and to always avoid causing harm.

# 8.6 WRAP-UP DAY 3, 5 MINUTES

## Presentation

**SHOW** a flipchart with the key messages from Session 8 to wrap up.

**EXPLAIN** that Day 4 will focus on Psychological First Aid. There will also be an action-planning session.

**ASK** participants to give feedback on sticky notes for Day 3 and put them in the suggestions box.

**ANSWER** any questions in the Car Park.

# **Session 9: Psychological First Aid**

#### Time:

2 hours and 30 minutes

## Objectives:

- Participants understand what Psychological First Aid is, and how and when it should be used
- Participants understand the importance of taking a survivor-centered approach when providing protection support

## Key Messages:

- It is important to care for yourself first, before caring for colleagues and those affected by crisis.
- Psychological First Aid is not professional counseling and is not something only professionals can do.
- The main priority when responding to allegations or incidents of abuse is to avoid causing additional harm.

#### Handout:

■ HO 17: WHO Psychological First Aid Pocket Guide (one copy per participant)

# **Training Tools:**

- TT 15: Safe Response Cards (one copy per group of three–five participants)
- TT 16: Dos and Don'ts of Psychological First Aid (two copies)

#### Materials:

Flipchart and pens

## Preparation:

- Cut out Safe Response Cards
- Cut out the Dos and Don'ts of Psychological First Aid and place in separate boxes

9.1 WELCOME TO DAY 4 AND RECAP OF DAY 3, 10 MINUTES								
Discussion	WELCOME participants to the last day of the training.  SHARE any feedback from Day 3 and any changes made as a result of that feedback.  REMIND everyone how they can give feedback.  ASK participants to think back to Day 3 and share:  One thing they learned.  One thing they found surprising.							

#### 9.2 WHAT IS PSYCHOLOGICAL FIRST AID? 35 MINUTES

# Presentation and Group Work

#### **Purpose**

Help participants understand the foundations of Psychological First Aid, both for responding to protection incidents in the communities they work in and in the aftermath of emergencies<sup>13</sup>

#### **Process**

**ASK** participants what they think of when then hear the term "Psychological First Aid." Use prompting questions about first aid so they make the link between other forms of first aid and Psychological First Aid:

- What is Psychological First Aid? When do we use it?
- How might DRR organizations use Psychological First Aid? In what scenarios or situations?

**SHOW** flipcharts with the following information and **EXPLAIN** that Psychological First Aid describes a humane, supportive response to a fellow human being who is suffering and who may need support. Providing it responsibly means:

- Respecting safety, dignity and rights
- Taking account of the person's culture
- Being aware of existing emergency response services
- Looking after yourself

**EXPLAIN** that Psychological First Aid is **NOT** something only professionals can do and is not counseling. It does not involve discussing distressing events in detail or pressuring people to tell their stories.

**EXPLAIN** that two people experiencing the same distressing event may have different reactions to it.

**ASK** participants to name factors that may influence how people respond. Examples include:

- The nature of the event(s)
- Their experience with previous distressing events
- The support they have in their life from others
- Their physical health
- Their personal and family history of mental health problems
- Their cultural background and traditions
- Their age

**EXPLAIN** that people do better in the long term if they feel safe and connected, have access to support and feel empowered to help themselves.

**SHOW** participants the flipcharts and **EXPLAIN** that people might react to distressing events in different ways. **EMPHASIZE** that all of these are normal reactions. Some people may only be mildly stressed or not distressed at all. Most people will recover over time. However, people with severe distress reactions may need more support than just Psychological First Aid, especially if they cannot function on a daily basis or are putting themselves or others in danger. Ensure that people experiencing severe stress are not left alone and try to keep them safe until you can find help from health care professionals.

**EMPHASIZE** that children may react differently than adults to a distressing event as they have specific needs according to their age and are vulnerable due to their physical size and dependence on caregivers as well as their social and emotional maturity.

**GIVE** each participant a copy of the *WHO Psychological First Aid Pocket Guide* (HO 17) and ask them to look through it.

**SHOW** on a PowerPoint or flipchart show this case scenario: You work for a local humanitarian organization on Pan Island doing a needs assessment after the disaster. The damage is widespread and many people have lost their homes. You encounter an adolescent boy who has been separated from his parents and is highly distressed.

<sup>&</sup>lt;sup>13</sup> Information in this section is adapted from: World Health Organization. Psychological First Aid: Guide for field workers. 2011.

**ASK** them to discuss the following in pairs for 5 minutes, referring to the Psychological First Aid Pocket Guide handout:

■ How would you respond to the boy? What actions would you take?

**DISCUSS** responses in plenary, highlighting the steps of LOOK, LISTEN and LINK.

**SHOW** flipcharts and **EXPLAIN** the principles of LOOK, LISTEN and LINK—including the need to ensure that staff, their colleagues and the survivor are safe before doing anything else.

**ASK** participants what they understand "active listening" to be, and then ask them what they think are ways they can help people feel calm.

Back in pairs, ASK participants to do the following activity for 5 minutes:

- Person A talks uninterrupted for 2 minutes while person B listens.
- Then person B tells the story back to Person A in their own words for 1 minute. Then reverse roles.

SUGGEST a topic to discuss. For example, "One time when I felt fear was..."

In plenary, **DISCUSS**:

- What was good about this activity?
- What did you find difficult?
- What will you learn from it?

**EMPHASIZE** the following key aspects of active listening:

- Paying attention
- Maintaining eye contact
- Showing that you are listening—keep posture open and interested
- Being attuned to feelings
- Listening without judging
- Not imposing opinions
- Not interrupting

**EXPLAIN** the principle of LINK to participants, highlighting the need to have accurate information before helping.

#### **Debrief**

- It is important to care for yourself first, before caring for colleagues and those affected by crisis.
- Psychological First Aid is not professional counseling and is not something only professionals can do.
- The three principles of Psychological First Aid are: Look, Listen and Link.

# 9.3 SAFE RESPONSES, 30 MINUTES

#### **Exercise**

#### **Purpose**

Clarify how staff can safely and ethically respond to protection incidents that they may hear about or witness

#### **Process**

**DIVIDE** participants into groups of 3–5 people.

**EXPLAIN** that, in the course of day-to-day work, humanitarian staff may be exposed to protection incidents, either directly witnessing them or indirectly hearing about them. It is important that staff respond in the right way.

 $\textbf{SHARE} \ the \ following \ scenario \ verbally:$ 

"You are a DRR Program Manager with no specific expertise in protection. You are visiting a preparedness training project early in the morning. A boy runs over to your group and tells your team that a woman was attacked earlier that morning. He takes you to see the woman who is highly distressed."

**GIVE** each group a set of cut out cards from *Safe Response Cards* (TT 15).

**ASK** them to read each response card and, for each, discuss the following:

- Do you think the suggested action is safe or unsafe?
- Why do you think the action is safe or unsafe?

When everyone is finished (or after 10 minutes), in plenary go through each card and **EXPLAIN** as follows (some information stated is correct and some is not):

- Ask the woman if she is hurt.
  - A first response step is to **check** if the survivor needs medical attention.
- Ask for details of what happened. Ask the survivor for details of when and where it happened. Ask who is responsible for attacking her.
  - Without proper training to interview survivors, staff should never try to interview or get detailed information about an incident.
  - There is a big difference between asking what happened (not advised) and whether a person is okay.
  - Staff should listen, not draw out information. Doing so can put them and the community at further risk. It is not helpful to involve someone who is not able to take action.
- Ask what specific help/assistance she needs. Ask if she wants you to contact someone to get support or help.
  - Helping a survivor access the right services (medical, counseling, legal) is an important step. Staff should have a list of services (e.g., the referral pathway card) to refer people.
  - Only contact a service provider if the survivor has given informed consent (i.e., clear and full permission).
  - Calmly offering something as simple as water, tea, tissues or help with contacting a friend/relative can be valuable.
- $\hfill \blacksquare$  Give the person contact information for health, counseling or other relevant services.
  - If the survivor does not want someone else to contact service providers for them, give them contact information so they can do it themselves.
- Don't say anything at the time, but later, call the police from somewhere private.
  - Do NOT call the police for the survivor unless they give you informed consent (clear permission).
- Report the incident to your manager or a protection staff member and ask for advice.
  - You should always report the incident to your manager or a protection staff member.

    They will be able to give you support on how to respond.
  - Organizations should have a system in place of how to respond.
- Do nothing if it is a domestic or family/community matter.
  - A survivor of domestic violence needs the same level of support as any other survivor.
     This support can include information about available services. Ignoring domestic violence is not acceptable. Domestic violence is a serious offense in most countries.
  - If there are obvious issues in the community, then the organization may decide to implement stand-alone protection activities, but this needs to be based on an analysis of the vulnerabilities, needs and capacities in the broader community, and the financial resources and technical expertise of the organization.
- Check safety: your safety, the safety of other staff members and the safety of the affected person and the community.
  - Before you take any action, it is important to check the safety of the survivor, yourself, the person they approached for help and other community members.

#### **Debrief**

- The main priority when responding to allegations or incidents of abuse is to avoid causing additional harm.
- Staff should make sure that they, their colleagues and the survivor are safe before doing anything else.
- Staff who witness or hear of allegations can give the survivor information about specialized services.
- They should not ask for specific details about the incident unless they have specialist training.
- Do not call the police unless the survivor gives informed consent.

# 9.4 WHAT IS A SURVIVOR-CENTERED APPROACH? 15 MINUTES

#### Presentation

#### **Purpose**

Give participants an understanding of how to support a survivor in a safe and appropriate way that respects their preferences

#### Process

**ASK** participants what they think of when they hear the term "survivor-centered approach." **WRITE** their responses on a flipchart.

**EXPLAIN** that a survivor-centered approach is where the survivors' wishes, safety and wellbeing are put at the center of the process, at all times and in all situations. It aims to give power back to survivors and respect their needs and wishes.

**EMPHASIZE** that we are talking specifically about survivors of gender-based violence. A survivor-centered approach recognizes that:

- Each person is unique.
- Each person reacts differently to gender-based violence and has different needs.
- Each person has different strengths, resources and coping mechanisms.
- Each person has the right to decide who should know about what happened.
- Each person has the right to decide what should happen next.

**EXPLAIN** that if staff hear about an incident of abuse or exploitation—such as sexual violence, physical violence or psychological violence—they should:

- Always protect the identity, confidentiality and safety of the survivor.
- Treat the survivor with respect.
- Make sure all communication happens in a safe place.
- Never share information about the incident without the survivor's informed consent (i.e., clear and full permission).
- Never share information about survivors in large group meetings. Only share information over the phone if absolutely necessary.
- Give survivors reliable information on the services and support that are available.
- Never investigate the case themselves.
- Give survivors information about accessing health care. This could include information about where and how they can get support, whether they can get free health care without making a formal report to the police or whether medical facilities have to report cases to the police.
- Give them information about accessing justice. This could include information about whether they need to make a formal report to the police or get treatment at a government facility to get a medical certificate that a court will recognize.
- Always consult the survivor and involve them in decisions that affect them.

**EXPLAIN** that in a survivor-center approach, we do not act on behalf of the survivor. The only exception is if someone is in danger of harming themselves or others or is unable to care for themselves or their dependents.

**DISCUSS** with participants the difference between advising and informing. Use the following guidance:

- Advising involves telling someone what they should do and how they should do it. This is not survivor-centered because the person giving the advice cannot know whether their advice is right for the survivor. Telling someone what to do does not help them make their own choices. The survivor might feel like the staff is not listening to them.
- Informing involves giving someone facts so they can make an informed decision about what to do. This is survivor-centered because it gives the survivor the power to make their own choices. It also shows respect for the survivor's opinion and judgment.

NOTE: You should adapt the information given to the age and capacity of the survivor.

**EXPLAIN** that empathy and listening skills are crucial when supporting survivors.

**EMPHASIZE** the importance of not making assumptions or judgements about survivors and incidents.

#### **Debrief**

- It is important to protect the identity, confidentiality and safety of survivors when they disclose information.
- Survivors must be involved in any decisions that affect them.
- Support survivors by providing information, *not* by advising.

#### 9.5 PSYCHOLOGICAL FIRST AID ROLE-PLAY, 55 MINUTES

#### **Exercise**

#### **Purpose**

Explore how to provide Psychological First Aid

#### **Preparation**

**DECIDE** on characters for participants to take for the role-play, either:

- Staff working for an organization specializing in disaster risk reduction and management (DRRM)
- Government workers visiting a community

**CHOOSE** a scenario for each group, for example:

- A woman has been attacked and is lying by the side of the road with an injured leg.
- An old man has been robbed of all his food supplies.
- An abandoned child is found on the outskirts of a community.
- A young girl is seen to be at risk of being trafficked.

#### **Process**

**EXPLAIN** that Psychological First Aid means responding in a humane, supportive way to someone who is suffering and who may need help.

**DIVIDE** participants into two groups.

**GIVE** out the "Dos" from *Dos and Don'ts of Psychological First Aid* (TT 16) to one group and the "Don'ts" to the other group.

**TELL** participants which role will be theirs during the role-playing.

**GIVE** each group a scenario to role-play.

**GIVE** the groups 15 minutes to prepare a role-play/drama highlighting the "Dos" and "Don'ts" they have been assigned, using the chosen scenario. This means one group will be doing all the "wrong" things and the other group will be doing the "right" things. (*NOTE*: If there are many participants, create more groups.)

**ASK** each group to perform their role-play while the other group tries to identify the behaviors they are demonstrating. The observing group should write them down on a piece of flipchart paper.

In plenary, **DISCUSS** the behaviors that the observing group noticed. Allow the groups to talk about their ideas until there are two comprehensive lists of Dos and Don'ts.

WRITE their ideas on a flipchart, and then compare them to the lists in TT 16.

#### **Debrief**

In plenary, **HIGHLIGHT** key points from the full list of "Dos" and "Don'ts" for Psychological First Aid, including:

- The importance of being honest and trustworthy, respecting confidentiality and supporting a survivor-centered approach.
- The important of not making any false promises, not forcing people to tell their story and not making any judgments about the person or situation.

9.6 WRAP-UP, 5 MINUTES								
Presentation	<b>SHOW</b> a flipchart with the key messages from Session 9 to wrap up.							

# **Session 10: Capacity Assessment Review Action Planning**

## Time:

2 hours and 10 minutes

# Objective:

■ Participants create action plans to address key gaps

# Key Messages:

- Action plans should be practical and realistic in terms of the human and financial resources that are available or are likely to be available.
- Ratings can be reviewed and updated as actions are completed, and new action plans can be developed for additional indicators.

# Handout:

■ HO 18: Action Plan Template

10.1 SELF-RATIN	10.1 SELF-RATING, 30 MINUTES									
Group Exercise	Process DIVIDE pa	Participants rate themselves against the Safe and Dignified Programming Framework  Process  DIVIDE participants into groups according to their organizations or teams.  REFER participants to the Safe and Dignified Programming Framework (HO 6).								
	<b>EXPLAIN</b> t	hat e	ach indicat	rganization against the indicators in the framework.  or should be given a score on a three-point scale using any system						
	they like (	e.g. n	iumbers, co	olors, letters, etc.). The examples below are illustrative only:						
	Green	1	Gold	These indicators have been fully met/all actions are being implemented.						
	Yellow	2	Silver	These indicators have been partially met/some of the actions are being implemented.						
	Red 3 Bronze These indicators have not been met/none of the actions are being implemented.									
Debrief ■ Ratings will help participants decide which actions to prioritize when action plan										

#### **10.2 ACTION PLANNING, 60 MINUTES**

#### **Group Exercise**

#### **Purpose**

Participants plan actions to embed Safe and Dignified Programming

#### Proces

**GIVE** each group a copy of the Action Plan Template (HO 18).

**EMPHASIZE** that the rating of programs should be linked to specific and concrete actions.

**SHOW** a flipchart with the material and go through each box to explain what they should include. As an example:

Program Sector	WASH/shelter/livelihoods										
Indicator(s)	(formats, la	Staff share information through a range of communication methods (formats, language and media) that are appropriate to the needs of the community, especially the most vulnerable and marginalized groups									
Findings from self-assessment	· ·	Program participants are not receiving information about the program in a range of formats									
Planned action to align with indicators	Start date	Start date End date Responsible Resources Cost required estimate									
Develop key messages	Now	Now 2 weeks Team leader Information \$0 from teams									
Print messages	Now	Now 1 month Administration Printers \$00									
Face-to-face visits	Now	Now Ongoing Team leader Staff time \$000									

**EMPHASIZE** that it is important that key actions are:

■ Linked to identified gaps ■ Properly costed

■ Realistic ■ Measurable

■ Timebound ■ Assigned to a person responsible for implementation

**ASK** groups to prioritize three–five indicators, to prevent them having too many areas of follow-up.

**SUGGEST** that they may decide to focus initially on areas given the lowest ratings because they are the most important or easiest to address.

**ASK** groups to write action plans for their chosen priorities.

**GIVE** groups up to 45 minutes to complete this task. In plenary, allow 10 minutes for the group to **DISCUSS** any key questions, challenges or suggestions that came up in their group work.

## **Debrief**

- Action plans should be practical and realistic in terms of the human and financial resources that are available or likely to be available.
- Ratings can be reviewed and updated as actions are completed, and new action plans can be developed for additional indicators.

**EXPLAIN** that copies of the completed frameworks and action plans can be saved. This can help with the follow-up process to see if actions have been completed, to identify areas requiring further support and to measure improvements if they are being used as a baseline.

#### **10.3 ELEVATOR PITCH, 20 MINUTES**

#### **Group Exercise**

#### **Purpose**

Recap and synthesize key learnings from the training

#### Process

**DIVIDE** participants into pairs.

**GIVE** the following scenario:

■ Imagine you are in an elevator with your boss. You have 60 seconds to explain Safe and Dignified Programming.

**GIVE** the pairs 10 minutes to prepare their 60-second message.

**REMIND** teams that their "pitch" should be clear, concise and should use simple language.

**EMPHASIZE** that participants must be careful to avoid using team- or organization-specific jargon or acronyms.

After 10 minutes, **ASK** each group to deliver their pitch to the group.

**DISCUSS** the pitches.

**ASK** participants to vote for their favorite by putting a dot on their favorite pair, listed on a flipchart.

#### **Debrief**

■ In plenary, **DISCUSS** the phrases that resonated the strongest.

## **10.4 CLOSING, 20 MINUTES**

#### **Group Exercise**

#### **Process**

**ANSWER** any last questions that participants have or any comments that were added to the Car Park.

**THANK** participants for participating and make sure that it is clear to them what follow-up and support are available.

# **Handouts and Training Tools**

#### HO 3: Summary of the Universal Declaration of Human Rights

#### HANDOUT 3. SUMMARY OF THE UNIVERSAL DECLARATION OF HUMAN RIGHTS

This is a simplified version of the full text of the Declaration from: International Rescue Committee. *Protection Mainstreaming Training Facilitator's Guide*. 2013.

- 1. Everyone is born free and has dignity because they are human.
- 2. Everyone has equal rights regardless of differences between people—such as gender, race, religion, language, wealth or political opinion.
- 3. Everyone has the right to life and the right to live in freedom and safety.
- 4. No one shall be held in slavery.
- 5. Everyone has the right not to be hurt, tortured or treated cruelly.
- 6. Everyone has the right to be treated as a person under the law everywhere.
- 7. The law is the same for everyone and should protect everyone equally.
- 8. Everyone has the right to ask for legal help when their basic rights are not respected.
- 9. No one should be arrested, imprisoned or expelled from their country without good reason.
- 10. Everyone has the right to a fair trial if accused of a crime.
- 11. Everyone has the right to be presumed innocent until proven guilty if accused of a crime.
- 12. Everyone has the right to privacy.
- 13. Everyone has the right to travel within and outside their own country.
- 14. Everyone has the right to seek asylum in another country if they are being persecuted in their own country.
- 15. Everyone has the right to a nationality.
- 16. Everyone has the right to marry and have a family.
- 17. Everyone has the right to own property on their own or with others. No one should have their property taken from them without good cause.
- 18. Everyone has the right to their own free thoughts, conscience and religion, including the right to practice their religion privately or in public.
- 19. Everyone has the right to say what they think and to share information with others.
- 20. Everyone has the right to meet with others publicly and privately, and to freely form and join peaceful associations.
- 21. Everyone has the right to vote in regular democratic elections and to take part in the government of their country.
- 22. Every country must do its best to ensure that everyone has enough to live a life of dignity.
- 23. Everyone has the right to work for a fair wage in a safe environment and has the right to join a trade union.
- 24. Everyone has the right to rest and leisure time.
- 25. Everyone has the right to a home, enough food and health care.
- 26. Everyone has the right to education and free primary education.
- 27. Everyone has the right to take part in the cultural life of their community and the right to benefit from scientific and artistic learning.
- 28. National and international laws and institutions must make possible the rights and freedoms set out in this declaration.
- Everyone has the responsibility to respect and uphold the rights of others in their community and the wider world.
- 30. No one has the right to take away any of the rights in this declaration.

# HO 4: Sex- and Age-Disaggregated Data (SADD)

### HANDOUT 4. SEX- AND AGE-DISAGGREGATED DATE (SADD)

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. 2018.

## What is sex- and age-disaggregated data (SADD)?

- SADD is data that is broken down according to a person's sex and age group.
- Once sex and age-disaggregated data are collected, an age and gender analysis should be done. This can help reveal who is affected, why and how. It can also reveal power dynamics, how people share roles/responsibilities and who controls access to resources.

#### Why is SADD important?

- Natural disasters and conflict do not affect everyone in the same way. They have very different effects on men, boys, women, girls, older people and people with disabilities. Social structures and conditions influence how disasters affect different groups of people.
- We need detailed information to tell us how these things affect different groups and how they are able to cope.
  This can help us make better decisions about who to help and how to help.

#### Case study

After the tsunami on Sunday, December 26, 2004, there was a survey of households in Aceh province, Indonesia. The survey found that two-thirds of those who died were female. A higher proportion of children 9 years of age and younger and people over 60 years of age, were also killed. Analysis of displaced families found that a much higher proportion of female-headed households decided not to go into camps. This was because many were widowed and were fearful they would not be safe in the camps. The SADD highlighted that:

- Many children were left without their mothers or older caregivers to look after them (grandparents often helped care for grandchildren).
- Many widowers were not able to take care of themselves and their children.
- People outside the displacement camps also needed services.
- Outreach was needed to identify displaced families.

#### Challenges<sup>14</sup>

Collecting SADD does not automatically lead to better programming for older people or women. Additionally, it can be difficult to collect SADD because:

- It can be hard to collect any data, let alone disaggregated data, at the start of an emergency and in insecure environments.
- In many contexts, there is little data available on older people.
- There is little understanding among disaster risk reduction (DRR) and humanitarian actors on what data can be collected at different stages of an emergency.

## **Troubleshooting**

■ It is possible to use national census data to estimate the proportions of men, women, girls and boys.

- Census data can be used to help design programs at the very start of a response before primary data is collected.
- Census data can be compared to primary data as it is collected. For example, if national census data shows that 15 percent of the population is over 60 years of age, but only 5 percent of program participants are over 60 years of age, that could mean that assistance is not reaching older people. The program would need to understand what barriers older people face and deal with them.

<sup>&</sup>lt;sup>14</sup> This case study is taken from: Mazurana D, Benelli P, Gupta H, Walker P. Sex and Age Matter. UNOCHA, Feinstein International Centre, Tufts University and Care International; 2011.

# Further guidance/information

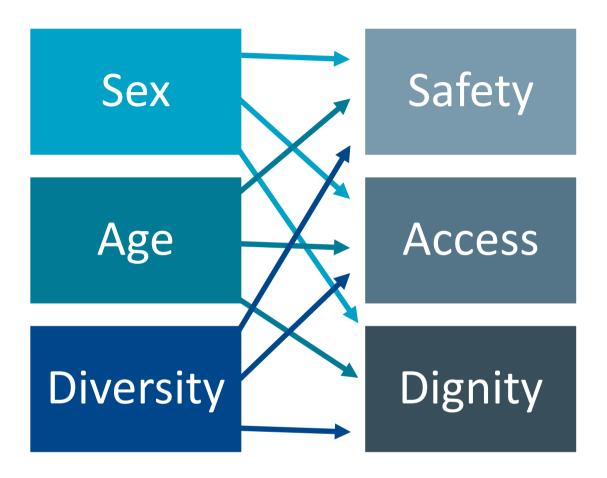
- The Age and Disability Capacity Programme (ADCAP) project developed guidelines to ensure the inclusion of older people and people with disabilities: <a href="https://www.helpage.org/newsroom/latest-news/new-humanitarian-guidelines-launched-for-ageing-and-disability-inclusion/">https://www.helpage.org/newsroom/latest-news/new-humanitarian-guidelines-launched-for-ageing-and-disability-inclusion/</a>.
- The United Nations Department of Economic and Social Affairs provides updated information on population estimations: <a href="https://www.un.org/development/desa/pd/">https://www.un.org/development/desa/pd/</a>.
- Sphere recommends disaggregating data at the earliest possible stage and has further resources at: https://spherestandards.org/humanitarian-standards/.

## HO 5: Sex/Age/Diversity—Safety/Access/Dignity (SAD—SAD)

#### HANDOUT 5. SEX/AGE/DIVERSITY-SAFETY/ACCESS/DIGNITY (SAD-SAD)

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. 2018.

Sex, age and diversity interact with the three key areas of protection mainstreaming: safety, dignity and access.



### Sex and gender

- The biological sex of a person and their gender (i.e., learned social differences between females and males) are very important factors in emergencies.
- They determine how people experience natural disasters and armed conflicts.
- Women and men face different risks, have different capacities and respond in different ways.
- Women and men will have different roles. For example, women may be the primary caregivers, while men may be the primary breadwinners.
- This often leads to differences in their experiences of accessing life-saving assistance. Emergencies tend to create, reinforce and worsen existing vulnerabilities. This means women tend to be affected to a greater degree.

## Age

- People's roles and circumstances change as they get older. For example, a baby girl will face very different risks than an older woman. The same is true when comparing the needs, vulnerabilities and capacities of young boys and older men.
- The United Nations (UN) defines "older people" as those above 60 years of age. However, this is context-specific and may be lower or higher in some cultures.
- The UN Convention on the Rights of the Child defines a child as a person below 18 years of age.

#### **Diversity**

- **Diversity** refers to different values, attitudes, cultural perspectives, beliefs, ethnic backgrounds, nationality, sexual orientation, gender identity, ability, health, social status, skills and other specific personal characteristics.
- These **differences** must be recognized, understood and valued by humanitarian actors to make sure that all people are treated equally and are able to access help safely and in a way that respects their dignity.
- **Disability** is when the interaction between a person's physical and/or mental ability and social or environmental factors hinders their participation in their chosen roles and routines:
  - This is different than impairment, which refers to a problem with body function or structure.
  - Disabilities can include issues with vision, movement, thinking, remembering, learning, communicating, hearing or forming/maintaining social relationships.
  - In 2011, the World Health Organization estimated that around 15 percent of the world's population lives with some form of disability. The proportion of older people (those over 60 years of age) with a disability stands at 46 percent.
  - People with disabilities may be particularly vulnerable in emergencies. One significant risk is being excluded
    from humanitarian assistance because of a lack of mobility or information. Humanitarian actors may assume
    that people living with disabilities are being cared for within a family or community system. However, their
    specific dietary, health or hygiene needs might be overlooked in responses.
- **Economic status** can determine the skills and assets people have and the extent to which these can enable them to cope in an emergency.
- **Political affiliation** can mean people are part of or excluded from formal political processes. Some people might also have, or lack, informal influence and power.
- **Social and cultural factors** are the beliefs, traditions, value systems, rules of behavior, laws, and language etc., held in common within a defined group of people. These can affect a person's standing within society and thus their power and vulnerability.

<sup>&</sup>lt;sup>15</sup> World Health Organization. World Report on Disability. 2011.

# HO 6: Safe and Dignified Programming Framework HANDOUT 6. SAFE AND DIGNIFIED PROGRAMMING FRAMEWORK

Adapted from Caritas Australia, CRS, CAFOD. Safe and Dignified Programming Framework. 2022.

	WHAT THIS MEANS		INDICATORS	RATING	NOTES
Analysis	Analysis  All programming is underpinned by an understanding of the protection context throughout the program cycle in order to ensure safety, dignity and meaningful access for people and communities.	1.1	Questions are included in needs assessments and design processes to ensure an understanding of vulnerabilities and to identify barriers to safety, access and dignity for diverse and vulnerable groups. <sup>16</sup>		
		1.2	Protection- and safeguarding-related threats, vulnerabilities and capacities—as well as power dynamics—are analyzed, inform programming and updated regularly throughout the program cycle.		
		1.3	All data collected is disaggregated by sex, age, disability, and, where appropriate, other diversity factors—such as language and ethnicity—and is used to inform programming.		
		1.4	Systems are in place to safeguard personal information collected from communities and keep it confidential.		

<sup>&</sup>lt;sup>16</sup> "Vulnerable and diverse groups" may refer, for example, to: women, men, girls, boys, youth and older people, as well as people with disabilities and specific minority or ethnic groups without any such distinction (Core Humanitarian Standards (CHS) available at: The Standard - CHS (corehumanitarianstandard.org).

	WHAT THIS MEANS		INDICATORS	F	ATIN	G	NOTES	
Targeting and diversity of need		2.1	Vulnerable and diverse groups are involved in the process of identifying criteria for targeting and selecting program participants.					
		identified, and programming is targeted accordingly, considering the diversity within	2.2	Programs are designed and adapted in line with local capacities to meet the different needs of diverse and vulnerable groups and to ensure there are no barriers to accessing assistance.				
		2.3	Programs are adapted in response to the protection risk analysis of safety and dignity concerns to minimize unintended negative effects.					
		2.4	Programs are designed to promote responsible interaction with the environment.					

	WHAT THIS MEANS		INDICATORS	R	ATING	G	NOTES
Information Sharing	Program participants and communities are informed of their	3.1	Diverse and vulnerable groups understand the role of the organization and its work—including what services are available to them.				
	rights and entitlements and have access to accurate and timely information.	3.2	Staff share information through a range of communication methods (formats, language and media) that are appropriate to the needs of the community, especially for the most vulnerable and marginalized groups.				
		3.3	Community members receive information sufficient to understand what they can expect in terms of behavior from staff and partners, particularly about preventing sexual exploitation, abuse and harassment.				
		3.4	When collecting communications material (e.g., photos and stories), staff prioritize the safety and dignity of community members, ensuring their full understanding, participation and permission.				

	WHAT THIS MEANS		INDICATORS	F	ATIN	G	NOTES
Community Engagement	There is active and inclusive community engagement in all stages of the	4.1	Staff uses participatory techniques to ensure active inclusion and representation of vulnerable and diverse groups.				
	program cycle that builds on and strengthens existing community and state structures, resources and capacities.	4.2	Ongoing community dialogue and regular meetings are held with people and communities (particularly with those who are most vulnerable) to foster participation in decisions that affect them.				
		4.3	Programs build on the existing capacities of vulnerable and diverse groups.				

	WHAT THIS MEANS		INDICATORS	F	RATING	NOTES
Feedback and complaint mechanisms	People are able to provide feedback and make complaints in a safe, dignified and confidential manner and receive an appropriate response when they	5.1	Diverse and vulnerable groups are consulted on appropriate, safe, confidential and context-specific channels for feedback and complaints, particularly those of a sensitive nature—including allegations of sexual exploitation and abuse, fraud and corruption.			
	do so.	5.2	Diverse and vulnerable groups have access to and are fully aware of how to use complaints and feedback mechanisms; they understand how their complaints and feedback will be managed, as well as when to expect a response.			
		5.3	Staff act on feedback and complaints in a timely, fair and appropriate manner that prioritizes the safety of complainants and those affected at all stages.			
		5.4	Staff understands the management system in place for handling sensitive complaints—including the procedure to ensure access to necessary support for complainants, especially survivors of sexual exploitation and abuse.			
		5.5	Staff refers complaints that do not fall within the organization's scope to a relevant party.			

	WHAT THIS MEANS		INDICATORS	R	ATIN(	G _	NOTES
Staff conduct <sup>17</sup>	Staff have appropriate knowledge and organizational support to conduct themselves and their work in a	6.1	Staff have signed and understand the organization's Code of Conduct and relevant safeguarding and protection policies and are aware of their rights and responsibilities. <sup>18</sup>				
	safe and appropriate way.	6.2	Field staff can be easily identified, and there is an adequate representation of women and other diverse groups.				
		6.3	All staff have clear roles and responsibilities and are supervised.				
	6.4	All aspects of staff well-being are considered, and staff have access to additional support if required.					

	WHAT THIS MEANS		INDICATORS	F	RATIN	G	NOTES
Mapping and referral	necessary knowledge, information and training to support people and communities in	7.1	Staff regularly map existing protection services and how to contact them.				
		7.2	Staff share information on available services as appropriate.				
	accessing existing services.	7.3	Staff are trained on when and how to refer cases.				

	WHAT THIS MEANS		INDICATORS	F	ATIN(	G	NOTES
Coordination and advocacy	Staff advocate and work with relevant actors to enhance safety and dignity; avoid duplication; and	8.1	Staff coordinates internally across programs to ensure safe and dignified programming is consistently included in all sectoral responses.				
	prevent, mitigate and respond to protection risks.	8.2	Staff collaborate with existing coordination groups and share information on safe and dignified programming practices.				
	8.3	Staff raises unaddressed safety and protection issues and risks with duty bearers, i.e., external stakeholders responsible for protection services.					

<sup>&</sup>lt;sup>17</sup> "Staff" are any designated representatives of the organization, including national, international, permanent or short-term employees, as well as volunteers and consultants (CHS <u>The Standard - CHS (corehumanitarianstandard.org)</u>.

<sup>18</sup> E.g., these could include policies on safeguarding, prevention of sexual exploitation and abuse, complaints handling and whistleblowing, etc.

# Optional component<sup>19</sup>

	WHAT THIS MEANS			F	RATIN	G	NOTES
Organizational safeguarding <sup>20</sup>	Safeguarding is recognized as a priority for the organization and is supported in organizational systems.	9.1	The organization undertakes an organization-wide risk assessment to understand the level of risk and highlight any safeguarding gaps, which informs a risk management plan.				
	9.2	There is an organizational whistleblower policy, a Code of Conduct and a Safeguarding Policy—including the IASC Six Core Principles, 21 which is known and used by staff.					
	9.3	The organization has clear lines of accountability and defined roles and responsibilities for safeguarding—including at the governance level with a designated focal person; these are known to staff.					
	9.4	The organization practices safe recruitment and induction for all staff, volunteers and contractors.					
	9.5	The organization has a comprehensive complaints mechanism to receive and manage sensitive complaints in a safe and confidential way.					
		9.6	The organization supports complainants—particularly survivors <sup>22</sup> of sexual exploitation and abuse—to access safe and relevant services (including medical, legal and psychosocial support).				

<sup>19</sup> This component is not intended as a comprehensive safeguarding guide. It aims to highlight certain key actions that are important at the organizational level that ensure programming enhances the safety, dignity and meaningful access of people and communities affected by crisis. For further information on safeguarding please see: <a href="https://www.keepingchildrensafe.global/">https://www.keepingchildrensafe.global/</a> and https://psea.interagencystandingcommittee.org/.

<sup>&</sup>lt;sup>20</sup> "Organization" refers to both funding and implementing organizations. Every is responsible for "cascading" safeguarding measures to their partners and/or sub-partners.

21 Inter-Agency Standing Committee (IASC). <u>IASC Six Core Principles Relating to Sexual Exploitation and Abuse, 2019</u>. 2019.

<sup>22 &</sup>quot;Complainant: the person making the complaint, including the alleged victim/ survivor of the sexual exploitation, abuse or harassment, or another person who becomes aware of the wrongdoing. Survivor or victim: the person who is, or has been, sexually exploited or abused. The term 'survivor' implies strength, resilience and the capacity to survive. The term 'victim' has protective implications, as it implies the victim of an injustice which we should seek to redress. Therefore, this resource uses both terms. People who have experienced SEAH may choose different terms to describe their experience." (CHS Alliance PSEAH Implementation Quick Reference Handbook PSEAH Implementation Quick Reference Handbook - English | CHS Alliance. 2019.

# **Guiding questions for the indicators**

The following questions should be used to guide teams on how they rate their activities against the indicators in the framework.

#### **Analysis**

All programming is underpinned by an understanding of the protection context throughout the program cycle in order to ensure safety, dignity and meaningful access for people and communities.

- 1.1 Questions are included in needs assessments and design processes to ensure an understanding of vulnerabilities and to identify barriers to safety, access and dignity for diverse and vulnerable groups.
  - Have efforts been made to identify the diverse groups and communities that exist within the program/program area—particularly those who may have increased vulnerability, e.g., people with disabilities, older people and people from marginalized ethnic or religious groups?
  - Have relevant teams (e.g., water, sanitation and hygiene [WASH], livelihoods, shelter, etc.) included
    questions about safety, dignity and barriers to accessing programs in their needs assessments?
  - Has data been collected on languages used within the program area and within diverse groups? Has this information been used to inform the translation of needs assessments? Have staff been provided with terminology lists and training on how to manage on-the-spot translation if necessary?
  - Are safety, dignity and access issues considered and prioritized in organizational plans, strategies and evaluations? Are they included in other relevant planning and analysis processes?
  - Is there consideration of the environment and how any potential program will interact with it and the safety and accessibility of the program?
- 1.2 Protection- and safeguarding-related threats, vulnerabilities and capacities—as well as power dynamics—are analyzed, inform programming and are updated regularly throughout the program cycle.
  - What behaviors and practices are communities and vulnerable groups adopting as a result of increased stress and pressure? (Consider both positive and negative coping strategies.)
  - Have existing skills and capacities in the community been identified—including consideration of the environment?
  - Who has power in the community, considering gender, age and diversity?
  - Do staff compile and regularly update, monitor and mitigate risks to safe, dignified and accessible programming for diverse groups?
  - Do staff consider safeguarding risks in their analysis, particularly if working on programs identified as high risk for safeguarding?
  - Have staff analyzed specific risks and protection mechanisms for children and adolescents, detailing particular risks and mitigation strategies for girls, boys and at-risk groups of children?
  - Has gender analysis been conducted—including an assessment of the risk of gender-based violence?
- 1.3 All data collected is disaggregated by sex, age, disability, and, where appropriate, other diversity factors—such as language and ethnicity—and is used to inform programming.
  - Is data broken down by sex, age and disability based on agreed parameters, e.g., age range for older persons and categories of disabilities?
  - Is it safe and appropriate to gather data on vulnerability factors?
  - Is disaggregated data used to inform programming, e.g., who to target, what type of assistance to provide, and how to provide it?
- 1.4 Systems are in place to safeguard personal information collected from communities and keep it confidential.
  - Are communities and individuals made aware of what information is being collected and why, and what happens if they do not want data collected or want it deleted?

- Is data collected, stored and managed in a secure way, e.g., locked in filing cabinets or passwordencrypted, with identifying information removed where necessary?23
- Is data shared only with those who are required to see or use the information?
- Is data subject to a data deletion plan and kept only for as long as necessary?

#### Targeting and diversity of need

The specific needs, vulnerabilities and capacities of communities and individuals are identified, and programming is targeted accordingly, considering the diversity within communities—including those who may be marginalized or disadvantaged.

- 2.1 Vulnerable and diverse groups are involved in the process of identifying criteria for targeting and selecting program participants.
  - · Are programs implemented without discrimination, i.e., impartially and based on need alone?
  - Is there documentation showing the decision-making process for identifying who to target/not target and why?
  - Have a range of diverse groups meaningfully participated in deciding the selection criteria for targeting?
  - Are consistent messages used to explain who has been targeted and why to the community?
- 2.2 Programs are designed and adapted in line with local capacities to meet the different needs of diverse and vulnerable groups and to ensure there are no barriers to accessing assistance.
  - Has the program been designed to meet the different needs of diverse groups to increase their safety, dignity and access to programs?
  - Has the program been designed to build on and support community capacities and resources in a culturally meaningful and sustainable way?
  - Has the program been designed to address and challenge existing inequalities—considering sex, age and diversity—in the safest way possible?
- 2.3 Programs are adapted in response to the protection risk analysis of safety and dignity concerns to minimize unintended negative effects.
  - Do staff routinely review and adapt programs in response to findings from ongoing protection/safeguarding analyses, regular program monitoring and accountability mechanisms?
  - Does program monitoring include questions about whether the program is being delivered safely?
  - Does program monitoring ensure that the most vulnerable people are accessing the services they need?
  - Do program lessons learned inform future work?
- 2.4 Programs are designed to promote responsible interaction with the environment.
  - Has the program been designed with the different ways diverse groups interact with the environment in mind?
  - Has the program been designed to ensure it does not contribute to the long- or short-term degradation of natural resources?
  - Are there clear strategies to assess, reduce and minimize negative impacts?

# Information sharing

Program participants and communities are informed of their rights and entitlements and have access to accurate and timely information.

<sup>&</sup>lt;sup>23</sup> See for example: The OCHA Data Responsibility Guidelines – The Centre for Humanitarian Data (humdata.org).

- 3.1 Diverse and vulnerable groups understand the role of the organization and its work, including what services are available to them.
  - Is accurate information about the organization and program shared with communities? Examples include: Who is the organization? What is the program? Who is targeted? What services would be provided and how long would it last? How can communities influence the program and provide feedback? How will the organization use and store data collected?
  - What methods does the organization use to ensure the community—especially diverse groups—correctly understand the information being given?
- 3.2 Staff share information through a range of communication methods (formats, language and media) that are appropriate to the needs of the community, especially for the most vulnerable and marginalized groups.
  - Have diverse groups within a community been asked what information they need, how they would like to receive it and in what languages?
  - Is the information shared in culturally appropriate ways, in different formats, (e.g., visual, face-to-face, aural), so that it meets the needs of the community—especially the most vulnerable and marginalized groups?
  - Has the information been developed so it can be easily understood by children?
  - Are communications with the community and services provided using languages and terms that people commonly use at home?
- 3.3 Community members receive information sufficient to understand what they can expect in terms of behavior from staff and partners—particularly about preventing sexual exploitation, abuse and harassment.
  - Do communities receive information on what is appropriate staff behavior and what is inappropriate staff behavior?
  - Do diverse groups (including children) know how to safely report/complain about inappropriate behavior?
- 3.4 When collecting communications material (e.g., photos and stories), staff prioritize the safety and dignity of community members, ensuring their full understanding, participation and permission.
  - Is there a process for obtaining and documenting informed consent from people for photographs and interviews that includes understanding how the information will be used, who it will be shared with, where it will be visible, how it will be stored and when it will be deleted?
  - Do staff obtaining stories have sufficient training and support to conduct interviews and take photographs in a sensitive way that protects the safety and dignity of interviewees?
  - Do stories about children and vulnerable adults protect their identities either by changing or not revealing personal information?

# **Community engagement**

There is active and inclusive community engagement in all stages of the program cycle that builds on and strengthens existing community and state structures, resources and capacities.

- 4.1 Staff uses participatory techniques to ensure active inclusion and representation of vulnerable and diverse groups.
  - Do staff use a range of techniques (e.g., mapping, calendars, problem trees, etc.) to capture the views of those with specific needs and at most risk of being excluded (e.g., children, people with disabilities, older people and people who cannot read or write, etc.)?
  - Are the communication methods and behaviors used appropriate to culture and context? For example, should meetings be held in separate groups for men and women and led by male or female staff?
- 4.2 Ongoing community dialogue and regular meetings are held with people and communities (particularly with those who are most vulnerable) to foster participation in decisions that affect them.
  - Are regular meetings and focus groups held with diverse groups throughout the program cycle?
  - Are the most vulnerable and marginalized groups included in decision-making processes?
  - Are diverse groups able to give feedback to the organization individually as well as collectively?
- 4.3 Programs build on the existing capacities of vulnerable and diverse groups.
  - Are programs designed to build on local skills, resources (e.g., physical, financial, environmental, etc.) and structures (e.g., women's groups, local government, youth groups, church groups, etc.) in communities?
  - Have staff identified important cultural practices and traditions that programming could build on or should acknowledge as potentially positive or harmful to programming outcomes, e.g., celebrations or rituals?

# Feedback and complaint mechanisms

People are able to provide feedback and make complaints in a safe, dignified and confidential manner and receive an appropriate response when they do so.

- 5.1 Diverse and vulnerable groups are consulted on appropriate, safe, confidential and context-specific channels for feedback and complaints, particularly those of a sensitive nature—including allegations of sexual exploitation and abuse, fraud and corruption.
  - Are diverse groups in the community consulted on the choice of complaint channels and the implementation and monitoring of feedback and complaint mechanisms?
  - Are there multiple culturally appropriate ways for diverse groups to provide feedback, e.g., help desk, hotline, WhatsApp, home visits?
  - Are there appropriate channels for the community and staff to make sensitive and, if necessary, anonymous complaints? Are there child-friendly channels?
  - Is there monitoring in place to allow the feedback and complaints systems to be adapted if necessary?
- 5.2 Diverse and vulnerable groups have access to, and are fully aware of how to use complaint and feedback mechanisms; they understand how their complaints and feedback will be managed, as well as when to expect a response.
  - Are specific complaint-handling mechanisms in place to receive and respond to complaints, especially sensitive complaints related to safeguarding?
  - Is there clear information about what types of complaints the organization can and cannot act on, e.g., non-sensitive complaints related to other agencies?
  - Are communities using feedback systems? If not, why?
  - Can speakers of marginalized languages give feedback in these languages? Do they have information on feedback systems in their language?
  - Have people and communities—including diverse groups—been made fully aware of:
    - Their right to feedback and how to lodge feedback and complaints.

- The expected behavior of staff and volunteers.
- Organizational commitments to protection from sexual exploitation, abuse and harassment.
- The limitations of what the organization can do.
- Can people contact the organization directly with complaints without going through a partner?
- 5.3 Staff act on feedback and complaints in a timely, fair and appropriate manner that prioritizes the safety of complainants and those affected at all stages.
  - Do people and communities receive timely acknowledgment, action and updates (anonymized if necessary) on the resolution or management of complaints?
  - Are feedback and complaints welcomed and accepted by staff members and taken seriously?
  - Does the feedback system include obtaining informed consent and responding to complaints either directly to the complainant or by visibly working in the community to resolve the issue?
  - Is there a backup mechanism for reporting complaints in case the initial channel does not result in adequate action?
  - Is there an established and functioning investigation process for feedback/complaints received?
  - Are programs adapted in response to feedback and complaints received, and is feedback regularly reviewed to inform learning and improve quality?
  - Do those who handle sensitive and non-sensitive complaints know their obligations for reporting to donors and/or government and statutory bodies?
- 5.4 Staff understands the management system in place for handling sensitive complaints—including the procedure to ensure access to necessary support for complainants, especially survivors of sexual exploitation and abuse.
  - Do staff understand the complaints-handling policy and know how to report sensitive complaints?
  - Are complaints registered systematically, acted upon and reported in line with best practice/policy?
  - Is there a key person assigned to manage complaints? Have they been trained appropriately?
  - Do staff have access to and understand guidance on the provision of assistance to survivors?
  - Is there a system and process in place to securely store and manage sensitive information, e.g., document encryption, locked filing cabinets, data protection policy, etc.?
- 5.5 Staff refers complaints that do not fall within the organization's scope to a relevant party.
  - Do staff know how to refer complaints that do not fall within the scope of their organization to a relevant party?

#### Staff conduct

Staff and partners (including volunteers and contractors) have appropriate knowledge and organizational support to conduct themselves and their work in a safe and appropriate way.

# 6.1 Staff have signed and understand the organization's Code of Conduct and relevant safeguarding/protection policies and are aware of their rights and responsibilities.

- Have staff received a translated (if necessary) copy of relevant policies and received training and refreshers on their practical application?
- Do staff understand what is acceptable behavior, particularly in relation to the prevention of sexual exploitation, abuse and harassment?
- Have staff received orientation on local etiquette and taboos so they understand culturally appropriate behavior?
- Are there safe and confidential ways to receive and respond to complaints about staff behavior that are understood and used by staff when necessary, e.g., a whistleblowing policy?
- Are staff meaningfully engaging with the Code of Conduct (and/or other relevant policies and international standards) and practically applying them, e.g., signing them, attending trainings/orientations and discussing them in one-to-one management meetings?

# 6.2 Field staff can be easily identified, and there is adequate representation of women and other diverse groups.

- Do staff working with communities represent diverse groups—including women, people living with disabilities, different ethnic and religious groups?
- Where safe and appropriate, are staff clearly identified as working for the organization, e.g., wearing identification (ID) badges or branded T-shirts?

# 6.3 All staff have clear roles and responsibilities and are supervised.

- Do all staff and partners understand their organization's mandate, their own roles and responsibilities and the limitations of their roles?
- Is this information available to staff in writing—including in job descriptions and terms of reference?
- Is supervision provided to staff on a regular basis?
- Do all staff understand the consequences of breaches of the organizational Code of Conduct and policies?

# 6.4 All aspects of staff well-being are considered, and staff have access to additional support if required.

- Is the organizational environment conducive to staff well-being and adequately resourced, e.g., suitable living conditions, working hours and opportunities for leisure and relaxation?
- Is there a person responsible for staff care within the organization who proactively engages with and is available to staff members?
- Are procedures in place to ensure that staff well-being is monitored and addressed at regular intervals, e.g., within appraisal formats, one-to-one meetings, other staff meetings, etc.?
- Do staff have access to mental health services if necessary, e.g., mentors or therapists?

# Mapping and referral

Staff have the necessary knowledge, information and training to support people and communities in accessing existing services.

#### 7.1 Staff regularly map existing protection services and how to contact them.

- Has contact been made with the nearest duty bearer (i.e., the agency responsible for protection services) for information on functioning and safe services? Does this information align with the latest context analysis/protection risks analysis?
- Is information on available sectoral services recorded, regularly updated and shared among staff in user-friendly and accessible ways, e.g., gender-based violence, mental health, psychosocial and child protection referral mapping? Are staff feeding into these resources?
- Do referral processes comply with local criminal and protection laws where any offences are committed?

#### 7.2 Staff share information on available services as appropriate.

- Have staff shared information on available services? With whom?
- Have staff shared information on gaps in services? With whom?

#### 7.3 Staff are trained on when and how to refer cases.

- If there are documented referral procedures issued by the protection cluster, are staff and partners using them to make referrals?
- Do staff understand their roles and responsibilities in relation to referring people to more specialized services, e.g., survivors of sexual exploitation or abuse and those at-risk of gender-based violence, etc.?
- Do staff know how to manage and mitigate risks associated with reporting and referrals in response to protection incidents?
- Do staff know how to respond in a sensitive and supportive manner if community members inform them
  of sensitive issues—including protection or safeguarding incidents? Are their actions guided by respect for
  survivors' choices, wishes, rights and dignity?

#### **Coordination and advocacy**

Staff advocate and work with relevant actors to enhance safety and dignity; avoid duplication; and prevent, mitigate and respond to protection risks.

- 8.1 Staff coordinate internally across programs to ensure safe and dignified programming is consistently included in all sectoral responses.
  - Is there a way to share experience and understanding about safety, dignity and inclusion within the organization?
  - Have humanitarian programs been informed by and built upon existing development work?
- 8.2 Staff collaborate with existing coordination groups and share information on safe and dignified programming practices.
  - Do staff share their experiences and lessons with other organizations or coordinating bodies?
- 8.3 Staff raise unaddressed safety and protection issues and risks with duty bearers, i.e., external stakeholders responsible for protection services.
  - Drawing on community and local partner perspectives—and where safe to do so—do staff raise issues such as unsafe service provision, excluded groups, gender-based violence or forced relocations with responsible actors (e.g., local government, protection cluster, United Nations High Commissioner for Refugees [UNHCR], etc.)?
  - Have staff checked any current sensitivities around advocacy—such as organizational risks or threats to staff if certain issues are raised?

# **Organizational safeguarding**

Safeguarding is recognized as a priority for the organization and is supported in organizational systems.

- 9.1 The organization undertakes an organization-wide risk assessment to understand the level of risk and highlight any safeguarding gaps, which informs a risk management plan.
  - Has the organization considered the context in which it works? For instance, is it located in a place where abuse and exploitation are common or where laws and authorities are weak in response to abuse?
  - Has the organization considered the level of direct contact with children and vulnerable adults by staff from departments such as funding, information and communication technology (ICT) and programs, as well as staff from partners? Has the potential impact and risks of such contact been considered?
  - Has the organization considered its internal structure, leadership commitments, power dynamics, approach to gender equality/equity, culture and other organizational processes and how they may influence the protection of staff, communities, children and vulnerable adults?
  - Does the organization review, revise and document safeguarding risks and preventative measures regularly?
  - Is the organization communicating and consulting on risks and preventative measures with governments, other protection actors, peer organizations and donors?
  - Does the organization use learning from programs to inform future work?
- 9.2 There is an organizational whistleblower policy, a Code of Conduct and a Safeguarding Policy (including the IASC Six Core Principles) which is known and used by staff.
  - Does the safeguarding policy include or make reference to a Code of Conduct document that clearly addresses expected behaviors and consequences of any breach?
  - Does the policy meet the minimum standards outlined in the Inter-Agency Standing Committee's Six Core Principles Relating to Sexual Exploitation and Abuse,<sup>24</sup> including:
    - Statement of zero tolerance for any form of exploitation or abuse by staff
    - Definition of a child/vulnerable adult
    - Definitions of abuse
    - Specific requirements and expected behaviors for working with children/vulnerable adults
    - Duty of staff to report suspicions or allegations
    - Procedures for staff to report suspicions and allegations of abuse
    - Consequences of failing to report abuse
  - Is there an outline of in-country reporting requirements—including to organizational leadership?
  - Are safeguarding policies and practices reviewed at regular intervals and formally evaluated every 3 years? Do written reports exist on progress on safeguarding implementation?
  - Are safeguarding policies publicly available and easily accessible to staff?
- 9.3 The organization has clear lines of accountability and defined roles and responsibilities for safeguarding—including at the governance level—with a designated focal person; these are known to staff.
  - Does the safeguarding focal person have clearly defined responsibilities? Have they received relevant training?
  - Are there documented different pathways (including a confidential route) for staff to contact a focal person?
  - Are there documented accountability mechanisms—including Boards of Trustees or other committees—holding the organization's executive body to account for safeguarding?

<sup>&</sup>lt;sup>24</sup> IASC. <u>IASC Six Core Principles Relating to Sexual Exploitation and Abuse</u>, 2019. 2019.

# 9.4 The organization practices safe recruitment and induction for all staff, volunteers and contractors.

- Are roles assessed for their level of safeguarding risk?
- Are safeguarding responsibilities reflected in job adverts and job descriptions (for relevant roles)?
- Are screening questions asked during the selection/interview processes?
- Are (at least two, if possible) references requested from previous employers or others with knowledge of the candidate's experience and suitability?
- Does the organization have a defined protocol for responding to requests for job references about former staff in cases of gross misconduct allegations or termination?
- Is there police vetting (as appropriate) of candidates?
- Is safeguarding included in induction training for new staff and in regular refresher training for existing staff?
- Are training records stored systematically by the organization?
- Does the organization make use of probationary periods of employment to ensure suitability once in post?
- Are there clear policies on the consequences of breaching the safeguarding policy and/or Code of Conduct?
- Do supervision and performance appraisals include adherence to the safeguarding and related policies?

# 9.5 The organization has a comprehensive complaints mechanism to receive and manage sensitive complaints in a safe and confidential way.

- Does the organization have an agreed and functioning policy and system to receive, manage and investigate complaints in a confidential, timely and appropriate manner that prioritizes the safety of the complainant and those affected at all stages?
- Does the organization have a culture that ensures complaints are taken seriously and acted upon in a timely way?
- Do disciplinary and whistleblowing processes address procedural fairness, privacy for those involved and appropriate levels of transparency about cases, e.g., with local law enforcement, donors and potential employees?
- Does the organization have access to trained staff with the skills and capacity to undertake investigations of sensitive complaints within the organization or via alternative external expertise?
- Is gender considered in the selection of staff conducting investigations, particularly when interviewing witnesses?
- Does the organization's complaint mechanism clearly articulate reporting requirements and procedures to donors, police and other statutory bodies?

# 9.6 The organization supports complainants—particularly survivors of sexual exploitation and abuse—to access safe and relevant services (including medical, legal and psychosocial support).

- Has the organization developed referral pathways and defined procedures for a safe and dignified referral process for immediate support to the survivor?
- Are the needs, wishes, well-being and safety of the survivor/complainant prioritized in the decisionmaking process in a non-directive and non-judgmental way?
- Is access to medical and psychosocial support provided to staff through an employee assistance program or equivalent, and support provided on their return to work?
- Are community members supported to access local medical and psychosocial services?
- Is immediate material care provided to survivors and support given to help them understand how to pursue claims (including legal claims) against alleged perpetrators?

# **HO 7: Example Safeguarding Policy**

# **HANDOUT 7. EXAMPLE SAFEGUARDING POLICY**

Adapted from Bond. Safeguarding Policy. 2018.

#### **Purpose**

The purpose of this policy is to protect people—particularly children, at-risk adults and beneficiaries of assistance—from any harm that may be caused due to their coming into contact with [insert non-governmental organization (NGO)]. This includes harm arising from:

- The conduct of staff or personnel associated with [NGO]
- The design and implementation of [NGO]'s programs and activities

The policy lays out the commitments made by [NGO] and informs staff and associated personnel of their responsibilities in relation to safeguarding.

This policy does not cover:

- Sexual harassment in the workplace; this is dealt with under [NGO]'s Anti-Bullying and Harassment Policy<sup>25</sup>
- Safeguarding concerns in the wider community not perpetrated by [NGO] or associated personnel

### What is safeguarding?

We understand "safeguarding" to mean protecting people—including children and at-risk adults—from harm that arises from coming into contact with our staff or programs.

#### Scope

- All staff contracted by [NGO]
- Associated personnel while engaged with work or visits related to [NGO]—including but not limited to:
  - Consultants
  - Volunteers
  - Contractors
  - Program visitors—such as journalists, celebrities and politicians

# **Policy statement**

[NGO] believes that everyone we come into contact with—regardless of age, gender identity, disability, sexual orientation or ethnic origin—has the right to be protected from all forms of harm, abuse, neglect and exploitation. [NGO] will not tolerate abuse and exploitation by staff or associated personnel.

This policy will address the following areas of safeguarding (as appropriate): child safeguarding, adult safeguarding and protection from sexual exploitation and abuse. These key areas of safeguarding may have different policies and procedures associated with them.

[NGO] commits to addressing safeguarding throughout its work through the three pillars of prevention, reporting and response.

### Prevention

# [NGO] responsibilities

[NGO] will:

Ensure all staff have access to, are familiar with and know their responsibilities within this policy.

<sup>&</sup>lt;sup>25</sup> Some NGOs now include workplace bullying and harassment in their safeguarding portfolio, as it relates to harm caused by coming into contact with our staff or programs. However, accompanying procedures for dealing with workplace bullying and harassment are likely to be different, due to legal and statutory differences in handling workplace incidents.

- Design and undertake all its programs and activities in a way that protects people from any risk of harm that may arise from their coming into contact with [NGO]. This includes the way in which information about individuals in our programs is gathered and communicated.
- Implement stringent safeguarding procedures when recruiting, managing and deploying staff and associated personnel.
- Ensure staff receive training on safeguarding at a level commensurate with their role in the organization.
- Follow up on reports of safeguarding concerns promptly and according to due process.

#### Staff responsibilities

#### 1. Child safeguarding

[NGO] staff and associated personnel must not:

- Engage in sexual activity with anyone under 18 years of age.
- Sexually abuse or exploit children.
- Subject a child to physical, emotional or psychological abuse or neglect.
- Engage in any commercially exploitative activities with children—including child labor or trafficking.

#### 2. Adult safeguarding

[NGO] staff and associated personnel must not:

- Sexually abuse or exploit at-risk adults.
- Subject an at-risk adult to physical, emotional or psychological abuse or neglect.

#### 3. Protection from sexual exploitation and abuse

[NGO] staff and associated personnel must not:

- Exchange money, employment, goods or services for sexual activity. This includes any exchange of assistance that is due to beneficiaries of assistance.
- Engage in any sexual relationships with beneficiaries of assistance since they would be based on inherently unequal power dynamics.

Additionally, [NGO] staff and associated personnel are obliged to:

- Contribute to creating and maintaining an environment that prevents safeguarding violations and promotes the implementation of this Safeguarding Policy.
- Report any concerns or suspicions regarding safeguarding violations by an [NGO] staff member or associated personnel to the appropriate staff member.

### **Enabling reports**

[NGO] will ensure that safe, appropriate and accessible means of reporting safeguarding concerns are made available to staff and the communities with whom we work.

Any staff reporting concerns or complaints through formal whistleblowing channels (or if they request it) will be protected by [NGO]'s Disclosure of Malpractice in the Workplace (Whistleblowing) Policy.

[NGO] will also accept complaints from external sources—such as members of the public, partners and official bodies.

#### How to report a safeguarding concern

Staff members who have a complaint or concern relating to safeguarding should report it immediately to their Safeguarding Focal Point (as appropriate) or line manager. If the staff member does not feel comfortable reporting to their Safeguarding Focal Point or line manager (for example, if they feel that the report will not be taken seriously or if that person is implicated in the concern), they may report to any other appropriate staff member. For example, this could be a senior manager or a member of the human resources (HR) team. [Provide contact details.]

#### Response

[NGO] will follow up safeguarding reports and concerns according to policy and procedure and legal and statutory obligations. (See procedures for reporting and response to safeguarding concerns in associated policies.)

[NGO] will apply appropriate disciplinary measures to staff found in breach of policy.

[NGO] will offer support to survivors of harm caused by staff or associated personnel, regardless of whether a formal internal response is carried out (such as an internal investigation). Decisions regarding support will be led by the survivor.

# Confidentiality

It is essential that confidentiality is maintained at all stages of the process when dealing with safeguarding concerns. Information relating to the concern and subsequent case management should be shared on a need-to-know basis only and kept secure at all times.

# **Associated policies**

- Code of Conduct
- Anti-bullying and Harassment Policy
- Disclosure of Malpractice in the Workplace (Whistleblower) Policy
- Child Safeguarding Policy
- Adult Safeguarding Policy
- Protection from Sexual Exploitation and Abuse (PSEA) Policy
- Complaints Policy
- Procedures for reporting and response to safeguarding concerns
- Procedures for safeguarding in staff recruitment
- Other policies as appropriate

# **Glossary of terms**

**Program participant.** Someone who directly receives goods or services from [NGO]'s program. Note that misuse of power can also apply to the wider community that the NGO serves and also can include exploitation by giving the perception of being in a position of power.

Child. Every human being below 18 years of age, irrespective of when the local law considers people as adults.

Harm. Psychological, physical or any other infringement of an individual's rights.

**Psychological harm.** Emotional or psychological abuse, including (but not limited to) humiliating and degrading treatment—such as bad-name calling, constant criticism, belittling, persistent shaming, solitary confinement or isolation.

**Protection from sexual exploitation and abuse (PSEA).** Actions to protect vulnerable people against sexual exploitation and abuse by humanitarian workers.

**Safeguarding.** The responsibility that organizations have to make sure their staff and work do not harm children and adults who are at risk and do not expose them to abuse or exploitation.

**Sexual abuse.** When a person forces another person, or people, to do anything sexual that they do not freely agree to, by force or through threats.

**Sexual exploitation.** Abusing a person's vulnerability, unequal power or trust for sexual purposes. This can include profiting in any way from another person being sexually exploited.

**Survivor.** A person who has been harmed, sexually exploited or abused. The term "survivor" emphasizes strength, resilience and survival. The term "victim" emphasizes that the person must be protected and needs justice.

#### **HO 8: Protection Risks**

#### **HANDOUT 8. PROTECTION RISKS**

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. 2018.

Protection risks means the possibility of someone experiencing danger or harm—including through violence, coercion, discrimination or deliberate deprivation. It is important to map protection risks in program areas, as there are things we can do to mitigate against them. We might also be able to help those who have been harmed.

The first step in a protection risk analysis is to identify the risks that exist where the project is implemented. Below is a list of common protection risks. Remove the risks that do not exist in your context and add those that are included.

For risks marked with asterisks (\*\*), it is important to think about each risk separately. For example, for physical violence, think about physical assault, trafficking and slavery individually, as only certain types of physical violence may exist in your context (e.g., physical assault) but not others (e.g., slavery).

# Sexual and gender-based violence

- Sexual violence (rape, attempted rape, sexual assault, sexual exploitation)\*\*
- Physical violence (physical assault, trafficking, slavery)\*\*
- Psychological violence (emotional abuse, isolation)
- Harmful traditional practices (female genital mutilation/cutting, early or forced marriage, "honor" crimes, witchcraft accusations, female infanticide)\*\*
- Socioeconomic violence (discrimination, denial of opportunities or services, denial of property rights, e.g., income or inheritance on the basis of gender or ethnicity)\*\*

#### **Child protection**

- Physical violence (e.g., corporal punishment)
- Sexual violence
- Forced recruitment into armed groups or gangs
- Child labor
- Separation or unaccompanied minors
- Lack or limited access to human rights (food, education, shelter, family, health services, documentation)\*\*
- Psychosocial distress and mental disorder

#### Physical safety of civilians

- Unsafe or inadequate infrastructure
- Unsafe or inadequate housing
- General insecurity and criminality (extra-judicial killing, kidnapping, unlawful detention, torture)\*\*
- Forced displacement
- Deliberate controls on freedom of movement
- Deliberate denial of access to basic services
- Deliberate targeting of civilian or protected infrastructure (such as schools, hospitals)
- Landmines and explosive remnants of war

# Housing, land and property

- Loss of land tenure documentation (lost or destroyed)
- Forced evictions
- Destruction of property

Lack of land, property and housing rights for specific groups (women, marginalized groups)

#### Exclusion or lack of access to services

- Lack of information on available services or assistance
- Lack of documentation
- Exclusion of specific groups
- Marginalization/stigmatization of specific groups
- Other barriers to access to services (social, political, cultural, geographical, logistical)

The two types of risks below are more specific to contexts where aid or development actors (NGOs, government or civil society) are present to assist a population.

# Safeguarding

- Sexual exploitation, abuse and harassment by anyone linked to humanitarian assistance and development programs (e.g., staff, volunteers, contractors, consultants, vendors, visitors, partners, etc.)
- Other exploitation and abuse by anyone linked to humanitarian assistance and development program
- Other forms of humiliating or degrading behavior

#### Data protection

- Information misuse or leakage that may negatively impact project participants (e.g., by leading to stigmatization, retaliation or abuse of power)
- Taking images or videos of program participants without asking for their informed consent and/or using these inappropriately.

# HO 9: Gender-Age Marker

#### **HANDOUT 9. GENDER-AGE MARKER**

Adapted from: Steets J, Binder A, Foran A. Gender-Age Marker toolkit. DG ECHO. 2013.

# What is a gender and age analysis?

Doing a gender and age analysis is important because it helps humanitarian organizations understand the different needs and capacities of women, girls, boys, men and older people who are affected by an emergency. This can help organizations improve their programming and offer support directly to the people who need it most.

Even if it is very short, a gender and age analysis should answer the following questions:

- What roles do women, girls, boys, men and older people traditionally play?
- Who controls resources in the household and society?
- Do any gender or age groups face discrimination? Do they face barriers when they try to access humanitarian assistance? Are any groups particularly vulnerable?
- How does the crisis or emergency affect different gender and age groups?
- If there is a crisis, how well do different groups cope, respond, recover and prepare for future crises?
- What specific needs do women, girls, boys and men of different ages have?
- Are any groups vulnerable in a particular way? Do any groups need particular types of support?
- If the program only supports one or a few specific groups (based on gender and age), what other groups should also be involved to avoid causing harm? What could happen if they are not involved, e.g., tension, violence, stigmatization etc.?

# How to do a gender and age analysis

Disaster risk reduction (DRR) and humanitarian actors can make a few small changes to give them useful information about different groups. For example, humanitarian organizations should include questions on gender, age and other diversity factors in their needs assessments. This means adapting the following:

- Who asks the questions? Men often feel more comfortable sharing information with men and women with women. Needs assessment teams should have male and female members. If possible, a staff member of the same sex as the participants should lead interviews and discussions.
- Who do they ask? Men, women, children and older people often have different needs and priorities and face different risks. Needs assessments should try to collect the opinions of different groups.
- How do they ask? There are special facilitation techniques for collecting information from specific groups. These techniques can help interviewers collect information on sensitive issues and listen to marginalized voices. For example, child-friendly facilitation techniques include using pictures to communicate.
- Which questions do they ask? Standard needs assessment questions can be adapted to focus more on gender, age and other diversity factors. This table gives practical examples.

SAMPLE QUESTION FOR INTERVIEWS OR DIRECT OBSERVATION	ADAPTED QUESTION
Name of interviewee.	Name, age and sex of interviewee.
Are there latrines at the site?	Are there separate, well-lit latrines at the site that you can lock?
Is there a queue at the main water point?	Is there a queue at the main water point, and who is in the queue?
Did you see school-aged children out of school?	Did you see school-aged children out of school? Boys or girls? How old were they?
What are the main safety issues for people in your community?	What are the main safety issues for women and men of different ages in your community?

SAMPLE QUESTION FOR INTERVIEWS OR DIRECT OBSERVATION	ADAPTED QUESTION
How many meals did people in this household eat yesterday?	How many meals and what kind of food did babies, girls, boys, women, men and older people in this household eat yesterday?
Has there been an increase in a specific disease lately in this community?	Has there been an increase in a specific disease lately in this community? Who did it affect?
What are the most important concerns in this community?	What are the most important concerns in this community for children, for women, for older people?

ECHO highlights an example from a non-governmental organization (NGO) conducting a needs assessment. They asked about the community's most acute needs but also asked what communities and individuals were doing to deal with problems and what solutions they suggest.

# **HO 10: Information-Sharing Template**

#### HANDOUT 10. INFORMATION-SHARING TEMPLATE

Adapted from: Caritas Internationalis. Information Sharing Template. 2016.

This template aims to help organizations identify what information needs to be shared with different groups throughout a program.

Program participants have a right to information. It is important to share information on who you are, what you do and how you work. Sharing information can help people access assistance, feel safe and improve their dignity. Access to information can also give people a sense of control over their own situation. It is important to make sure the information you share reaches different groups—including women, men, girls, boys, young people, old people, people with disabilities and people from different ethnic and religious groups, etc.

Information needs to be adapted to reach different groups—including vulnerable people. Using different formats to share the same information can help. The following template can assist you in thinking through what information needs to be shared, with who and how.

#### Example of a completed table

SECTOR/ACTIVIT	тү			
what information is to be shared?	WHO are you trying to reach with this information?	HOW will you reach different groups? What mechanism will be used?	WHERE will you be sharing the information?	WHEN will you share the information with different groups in each area?
Program activities and targeting	Women and men	Community meeting	Community X and Y	Monday (a.m.), Wednesday (p.m.), Friday (a.m.)
	Elderly men and women	Church announcements	Community X	Twice daily, Monday– Friday
	Elderly men and women	Mosque announcements	Community Y	Twice daily, Monday– Friday
	People with disabilities and specific minority or ethnic groups	Door-to-door	Community X and Y	Monday and Tuesday (all day)
Evacuation information	Youth (girls and boys)	School groups (posters, Information, Education and Communication [IEC] materials)	School A, B and C	Every Thursday
	Boys and men	Sessions with men and boys	Market X and Y	Tuesday and Friday
	Women	Face-to-face at water points	Water point X, Y and Z	Monday, Wednesday and Friday
	Adult men and women	Radio debates	District X and Y	Weekly for two months

WHAT information is to be shared?	WHO are you trying to reach with this information?	HOW will you reach different groups? What mechanism will be used?	WHERE will you be sharing the information?	WHEN will you share the information with different groups in each area?

# HO 11: Information and Communication Questions in Rapid Needs Assessment

#### HANDOUT 11. INFORMATION AND COMMUNICATION QUESTIONS IN RAPID NEEDS ASSESSMENT

Adapted from: Communicating with Disaster-Affected Communities. <u>Information and Communications Questions in Rapid Needs Assessments</u>. 2014.

# Phase 1 (first 72 hours)

It is important to understand the best way to communicate with communities. Collect information about:

- Which areas have lost phone, radio and TV coverage
- Which cellphone networks, radio and TV stations are still working
- Which areas have lost power
- How people are currently receiving and sharing information

Information about the impact of a crisis on existing media channels can be found in several ways:

- Utilize direct observation, for example, by looking for damaged cell towers, tuning in to radio stations to check which are still on air and checking cellphone signals.
- Call national regulatory bodies, mobile phone companies, journalist networks, radio and TV stations in the affected area, and any media development agencies in the country. Information about major media organizations in some countries can be found in CDAC's Media Landscape Guides: <a href="https://www.cdacnetwork.org/media-landscape-guides">https://www.cdacnetwork.org/media-landscape-guides</a>.
- Call non-governmental organizations (NGOs) with programs in the affected area to ask about their access to communications channels.
- For information on cellphone connectivity, contact the Emergency Telecommunication Cluster or national/international associations of telecommunications companies—such as the <u>GSMA</u>.

#### What can be done with this data?

- Think about how your organization will communicate with the crisis-affected population, given how the communication infrastructure has been affected.
- Make sure the information you have collected on communication channels and infrastructure is shared with national and international humanitarian structures/mechanisms.

# Phase 2 (first two weeks)

Include the following five questions in any rapid needs assessments. Each question has multiple components.

#### Question 1

- What are the main channels of communication available to the community now? (Rank top three only, 1 = most useful)
- What channels did you use before? (Rank top 3 only, 1 = most useful)

Leaflets	Television	Radio	Newspapers	Magazines
Social media	Cellphone (calls)	Cellphone (SMS)	Loudspeaker	Internet
Religious leaders	Government	Friends and family	Health professionals	Music
Posters	Community leaders	Theatre	Other	Do not know
Billboards	Word of mouth	Film	Refused	

# Question 2

- What is preventing you from getting the information you need now?
- Are there groups in the community finding it hard to get information? Why are they finding it hard? (This is a deliberately open-ended question: note the answer alongside Question 2.)

No access to electricity	I do not trust where the information is coming from	My device is lost or damaged:
Cell network is down	TV/radio station is no longer running (specify what happened)	■ TV ■ Radio ■ Computer
Information is in the wrong language	I cannot buy credit	■ Cellphone
Information is written but I cannot read	Other	
Do not know	Refused	

# Question 3

- Which sources of information do you trust the most? (Rank top 3 only, 1 = most useful)
- Which sources do people trust the **least**? (Rank top 3 only, 1 = most useful)
- Are there any groups that trust different sources of information, e.g., men/women/older or disabled people? Which ones are they? (This is a deliberately open-ended question: note the answer alongside Question 3.)

Television (specify channel)	Government	NGO workers
Radio (specify station)	Community leader	United Nations (UN) staff
Print media (specify)	Other community members	Other (write in)
Internet (specify site)	Religious leaders	Do not know
Social media (specify)	Armed forces	Refused
Health professional	Police	

# Question 4

What more do you need to know? (NOTE: This question is often misinterpreted to mean general needs rather than information needs. It may need further explanation but avoid leading the respondent.)

News on what is happening here	Weather
News on what is happening at home	How to get healthcare/medical attention
Finding missing people	How to get help after attack or harassment
Security situation here	How to stay safe to prevent attack/harassment
Security situation at home	How to replace personal documentation (e.g., identification [ID], birth certificate)
Communicating with people who are in a different place	How to get access to education
How to register for aid	How to find work

How to get water	How to get transport
How to get food	How to get money/financial support
How to get shelter/accommodation or shelter materials	Information about possible return to place of origin
Information about nutrition	Information about relocation
Food prices	Other (write in)
Local crop/livestock prices	Do not know
How to get cooking fuel/firewood	Refused

#### **Question 5**

■ How would you most like to communicate with aid agencies, e.g., to ask a question, to complain or to make a suggestion? (Rank top 3, 1 = top preference)

Face-to-face (at home)	SMS	Social media (specify site)	Tweet
Face-to-face (office/desk)	Email	Suggestion box	Other
Phone call	Letter	Radio/TV show	Do not know

# What can be done with this data?

- Use the information collected to develop a communications strategy. This should include the aims, objectives, target audiences, key messages, communication methods and feedback channels. This will help to make sure communication activities are included in your overall response and that you have the right content and method/channels for different audiences.
- A useful resource for developing message is the CDAC Message Library: <a href="https://www.cdacnetwork.org/message-library">https://www.cdacnetwork.org/message-library</a>. library.
- Discuss how you can get information to affected communities and how you can help communities communicate easily with your agency. You may have to work with local media stations, community leaders, volunteer networks and other trusted sources of information. (*NOTE*: check beforehand who runs each station and if a partnership with them could threaten humanitarian principles.)
- If a communication coordination mechanism exists (for example, a communication working group), make sure you share your communication data and activities.
- Find out if you can join a communication coordination mechanism with other actors. This can help avoid repeating or contradicting messages from other organizations, as this can lead to confusion. Examples include a telephone hotline, inter-agency community consultations, or collaborating to sponsor a radio program for affected communities.

# Phase 3 (3-4 weeks)

More detailed assessments may take place in Phase 3. This may be done by individual organizations or by multiple agencies or clusters. This can help humanitarian agencies design better programs based on the needs of communities.

Two-way communication between organizations and communities will change along with the situation on the ground. In some humanitarian contexts, the damaged communication infrastructure can be repaired quickly. In other contexts—such as conflicts—it may take longer. It is therefore important to check often what is working and trusted and what is not.

The media development agencies that make up the CDAC Network have agreed to use common assessment tools. These tools, available on the CDAC website, can be used by any humanitarian agency. For information on these tools or to find out more about conducting in-depth communications assessments, see: <a href="https://www.cdacnetwork.org/tools-guidance">https://www.cdacnetwork.org/tools-guidance</a>.

# HO 12: Feedback Channels

#### **HANDOUT 12. FEEDBACK CHANNELS**

Adapted from: Caritas Internationalis. Information Sharing Template. 2016.

This template aims to help organizations identify what information needs to be shared with different groups throughout a program.

Program participants have a right to information. It is important to share information on who you are, what you do and how you work. Sharing information can help people access assistance, feel safe and improve their dignity. Access to information can also give people a sense of control over their own situation. It is important to make sure the information you share reaches different groups—including women, men, girls, boys, young people, old people, people with disabilities and people from different ethnic and religious groups, etc.

Information needs to be adapted to reach different groups—including vulnerable people. Using different formats to share the same information can help. The following template can assist you in thinking through what information needs to be shared, with who and how.

#### Example of a completed table

SECTOR/ACTIVITY					
what information is to be shared?	WHO are you trying to reach with this information?	HOW will you reach different groups? What mechanism will be used?	WHERE will you be sharing the information?	WHEN will you share the information with different groups in each area?	
Program activities and targeting	Women and men	Community meeting	Community X and Y	Monday (a.m.), Wednesday (p.m.), Friday (a.m.)	
	Elderly men and women	Church announcements	Community X	Twice daily, Monday– Friday	
	Elderly men and women	Mosque announcements	Community Y	Twice daily, Monday– Friday	
	People with disabilities and specific minority or ethnic groups	Door-to-door	Community X and Y	Monday and Tuesday (all day)	
Evacuation information	Youth (girls and boys)	School groups (posters, Information, Education and Communication [IEC] materials)	School A, B and C	Every Thursday	
	Boys and men	Sessions with men and boys	Market X and Y	Tuesday and Friday	
	Women	Face-to-face at water points	Water point X, Y and Z	Monday, Wednesday and Friday	
	Adult men and women	Radio debates	District X and Y	Weekly for two months	

WHAT information is to be shared?	WHO are you trying to reach with this information?	HOW will you reach different groups? What mechanism will be used?	WHERE will you be sharing the information?	WHEN will you share the information with different groups in each area?

# HO 13: Feedback Channel Pros and Cons

# HANDOUT 13. FEEDBACK CHANNEL PROS AND CONS

This table gives a summary of the pros and cons of different feedback channels. The choice of feedback mechanisms should be based on community members' preferences, but there are other factors to consider.

Feedback channel	Advantages	Disadvantages
Suggestion box A secure box for written feedback and complaints using free text or forms	<ul> <li>Can have a wide reach if placed in high-traffic areas</li> <li>Easy to set up in small-scale projects</li> <li>Accessible to people who are not program participants</li> <li>Suitable for anonymous or confidential complaints (but the location of the box could limit privacy)</li> <li>Can be placed in the community for a long time, so members can access it at any time</li> <li>Can be mobile</li> </ul>	<ul> <li>Not suitable for community members who cannot read or write</li> <li>Can exclude people with limited mobility—such as those in remote locations or older people</li> <li>Not ideal for communities spread over large areas or for urban or large camp settings</li> <li>Processing and responding to written feedback can be slow</li> <li>It may be difficult to respond to individuals or communities if they do not give enough contact information</li> <li>Can be destroyed in a disaster—such as a cyclone, flood or earthquake</li> <li>Responders may not be able to manage written communication in local languages</li> </ul>
Hotline and short message service (SMS): single prepaid account (managed in-house) A number for community members to call or text to give feedback directly to a staff member	<ul> <li>Very accessible if the location has good network coverage and if diverse program participants use mobile phones</li> <li>Suitable for remote areas and large-scale responses</li> <li>Suitable for anonymous or confidential complaints; however, if calls can be traced, this could be a barrier</li> <li>Easy to use for people with low digital literacy</li> <li>Accessible to people who are not program participants</li> <li>It is possible to quickly acknowledge, respond to and refer complaints.</li> <li>Can be used to tell disaster actors about a disaster event and ask for prompt support</li> <li>Can be multilingual</li> </ul>	<ul> <li>Requires set-up time, which may be unsuitable for short projects</li> <li>Excludes community members without access to a cellphone, electricity to charge one or phone credit</li> <li>Can be expensive for callers if there is no toll-free number</li> <li>Personal data may not stay confidential</li> <li>There may be long delays in responding if the hotline has high traffic</li> <li>Some disaster events can interrupt phone coverage</li> </ul>
Hotline: Interactive voice response (IVR) A dedicated number for community members to access information and record a message	<ul> <li>High accessibility (24/7) if there is good network coverage</li> <li>Program participants can call at any time</li> <li>Can help decrease the amount of feedback and complaints received because questions can be answered with key information</li> <li>Can be free for communities</li> </ul>	<ul> <li>More effective for sharing information than managing feedback and complaints</li> <li>Excludes community members without access to a cellphone, electricity to charge one or phone credit</li> <li>Can be expensive for users if there is no toll-free number</li> </ul>

Feedback channel	Advantages	Disadvantages
	<ul> <li>Suitable for anonymous or confidential complaints (the caller can decide if they want to leave contact information)</li> <li>Easy to use for people with low digital literacy</li> <li>Can be multilingual</li> </ul>	<ul> <li>High staffing and resource costs: there must be an agreement with a service provider and staff time to listen to and log messages</li> <li>Feedback may not include details needed for follow-up (e.g., name of agency the feedback is about, contact information), especially if feedback does not fit into set categories</li> <li>Audio must be transcribed and translated to manage multiple languages</li> </ul>
Face-to-face with staff Staff (such as community liaison officers with specific feedback mechanism tasks) approached by individuals in the field to receive and record feedback and complaints directly	<ul> <li>Often one of the most popular channels with communities</li> <li>Can reveal if programs are having unintended effects that are not being monitored</li> <li>Makes it possible to respond to urgent questions and refer people quickly; can resolve many issues immediately</li> <li>Can be multilingual</li> </ul>	<ul> <li>Staff may find recording feedback time-consuming and tiring</li> <li>Staff may think complaints reflect poorly on them and be reluctant to process them</li> <li>If there is a disaster event, it can be difficult to reach people in remote areas because roads may be damaged</li> <li>During recruitment, it is necessary to make sure staff have the appropriate language skills</li> </ul>
Community focal point (or feedback and complaints committee) Locally managed focal point/committee appointed by community members trained to collect and document feedback and complaints	<ul> <li>Often a popular channel because community members may feel more comfortable talking to a community member than to a staff member</li> <li>Increased ownership by community</li> <li>Can build on existing social and cultural channels to resolve issues rather than imposing an unfamiliar approach</li> <li>Many issues and urgent questions can be resolved immediately; referrals can also be made immediately</li> </ul>	<ul> <li>Requires training, time and effort from community members</li> <li>Complaints go through too many channels</li> <li>Risk of high turnover or low effort if community members are not paid for this work</li> <li>Marginalized languages may be overlooked</li> </ul>
Help desk near project sites or designated drop-in at the office  Desk or hub set up at the office or in the field, with designated operating hours and trained staff or community volunteers to answer questions and listen to concerns	<ul> <li>Easy to set up</li> <li>Highly accessible when set up with other program activities—such as at a distribution site</li> <li>Good visibility if set up in high-traffic areas</li> <li>Useful in communities with low literacy</li> <li>Suitable for confidential feedback and complaints; however, complainants may not want to share information if the help desk is in a public place</li> <li>Offers face-to-face contact, which community members often prefer</li> <li>Fast and immediate response; possible to resolve many issues immediately</li> <li>Staff/volunteers can follow up or ask for more detailed information</li> </ul>	<ul> <li>Low accessibility for those who are far from the project or office location</li> <li>Can be difficult to set up after a natural disaster event if infrastructure was damaged or destroyed</li> <li>Less accessible to people who are not program participants if it is set up as part of project activities</li> <li>It is not possible to stay anonymous</li> <li>Staff must be selected based on language skills</li> </ul>

Feedback channel	Advantages	Disadvantages
	<ul><li>Can offer quick support and orientation if there is a disaster event</li><li>Can be multilingual</li></ul>	
Open community meetings Meetings organized at project locations bringing together large groups of people to share information and collect feedback and complaints	<ul> <li>Easy to set up</li> <li>Can ask for feedback and complaints from many people in a limited time</li> <li>Can involve people who are not program participants</li> <li>Can be adapted to the audience (e.g., using child-friendly approaches)</li> <li>Suitable for communities with low literacy</li> <li>Low staffing and resource costs</li> <li>Allows immediate responses</li> <li>Can respond to common questions and concerns immediately and for many people simultaneously</li> <li>Can be multilingual</li> </ul>	<ul> <li>Discussions may be limited if some people dominate group</li> <li>May not be suitable in cultures where public criticism is not acceptable</li> <li>Can exclude most marginalized groups (such as women and children) who may not feel comfortable attending or sharing their concerns</li> <li>Not suitable for anonymous or confidential complaints</li> <li>May need interpreters for speakers of marginalized languages</li> </ul>
Social media and instant messaging platforms (e.g., Twitter, WhatsApp)  A dedicated account available for individuals to share written or voice messages and pictures	<ul> <li>Can have a wide reach if the location has good network coverage</li> <li>Good way to quickly collect information about immediate needs in the first phase of an emergency response across a large area</li> <li>Can manage anonymous or confidential complaints if user accounts do not contain identifiable information</li> <li>Can be multilingual</li> </ul>	<ul> <li>Requires good network coverage and access to smartphones or computers</li> <li>Requires digital literacy to set up and use</li> <li>Can create a lot of feedback and questions, which can overwhelm staff</li> <li>Risk of online safeguarding issues</li> <li>In remote areas, it may be difficult to share phone numbers or accounts with the community</li> <li>Requires staff to manage platforms</li> <li>Some natural disasters can affect internet coverage</li> <li>Requires fast translation to send and receive messages in several languages</li> </ul>
Dedicated email address A dedicated email address set up for individuals to send messages	<ul> <li>Very accessible if the location has good network coverage and if communities have access to smartphones or computers</li> <li>Suitable for anonymous complaints if user email accounts do not contain identifiable information</li> <li>People may see emails as a formal and respectable way to give feedback</li> <li>Easy to set up</li> </ul>	<ul> <li>Requires good network coverage and access to smartphone or computer</li> <li>Requires digital literacy</li> <li>Risk of online safeguarding issues</li> <li>There may be delays in response and flexibility</li> <li>Follow-up depends on the user supplying contact information</li> <li>Some natural disasters can affect internet coverage</li> </ul>

# HO 14. Twelve Steps to Setting Up Complaint Handling Mechanisms HANDOUT 14. TWELVE STEPS TO SETTING UP COMPLAINT HANDLING MECHANISMS

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. 2018.

		Status	Gaps	Next steps
1	Gain commitment/support from senior management			
2	Consult program participants, host communities and other stakeholders			
3	Develop policy based on community input and program resources			
4	Train staff on complaint handling			
5	Sensitize community on complaint-handling process			
6	Receive feedback and complaints			
7	Log and acknowledge feedback and complaints			
8	Consult, review and investigate			
9	Respond to complainants			
10	Provide opportunity to appeal decisions			
11	Review complaints trends, report to management and adjust program accordingly			
12	Review effectiveness of complaint system and make adjustments			

# **HO 15: IASC Six Rules**

#### **HANDOUT 15. IASC SIX RULES**

Adapted from IASC Six Core Principles Plain English Version, IASC Six Core Principles | IASC / PSEA (interagencystandingcommittee.org) (2019)

# Rules on sexual conduct for humanitarian workers:

- Humanitarian workers can be disciplined—even fired—for unacceptable behavior in relation to sex.
- Humanitarian workers are not allowed to have sexual relationships with anyone under 18 years of age, even if it is legal in their country. Saying they did not know the person's true age is not a valid excuse.
- Humanitarian workers are not allowed to pay for sex with money, employment, goods or services—including goods and services intended as aid to people in need. They must not use promises of these things to make other people accept any kind of behavior that humiliates or exploits them. This includes paying or offering money for sex with a prostitute.
- Humanitarian workers who might affect who gets goods and services must not have sex with anyone who may get that help. If they do, it destroys trust in the work.
- If a humanitarian worker is worried or suspects that anyone in their organization or another aid organization may be breaking humanitarian rules on sexual conduct, they must report it, following procedures set up by their agency.
- Humanitarian workers must create and maintain a work environment which prevents unacceptable sexual behavior and encourages staff to behave as set out in their Codes of Conduct. All managers are responsible for supporting and developing systems which maintain this environment.

# HO 16: Developing a Referral Pathway for Essential Protection Services

#### HANDOUT 16. DEVELOPING A REFERRAL PATHWAY FOR ESSENTIAL PROTECTION SERVICES

#### Introduction

Referral pathways enable people to access relevant protection services designed to prevent or respond to situations of harm, abuse or exploitation. These may include child protection, legal help, psychosocial support or healthcare. As disaster risk reduction (DRR) actors may not be qualified to offer these services, it is important to have reliable, clear information on referral pathways to protection service providers.

The tool deals with two key areas of information: 1) mapping services and 2) developing referral pathways. It does not address a third area—making protection referrals.

- Mapping protection actors and services. This involves finding and documenting all the relevant protection
  actors in each area. This can include services that governments, non-governmental organizations (NGOs) and
  community-based and other civil society organizations offer. If the government or Protection Cluster has not
  already conducted an up-to-date mapping, DRR and humanitarian actors should collect this information, ideally
  with help from a local protection actor.
- 2. **Developing a referral pathway.** After mapping the protection actors in the local context, DRR and humanitarian actors can use this information to develop a referral pathway. This is a document that shows organizations and program participants how to access essential protection services; it tells them where to go and who to contact for help with a specific protection need. This information can then be shared widely to orient people affected by protection risks toward the services they need.
- 3. Making a protection referral. This means referring at-risk or vulnerable people to appropriate protection actors identified during the protection mapping. Trained staff accompany people with protection needs throughout the referrals process, so they receive the service they need and can access any other recommended services. This should not be undertaken without specific case-management and protection expertise.

#### Purpose of the tool

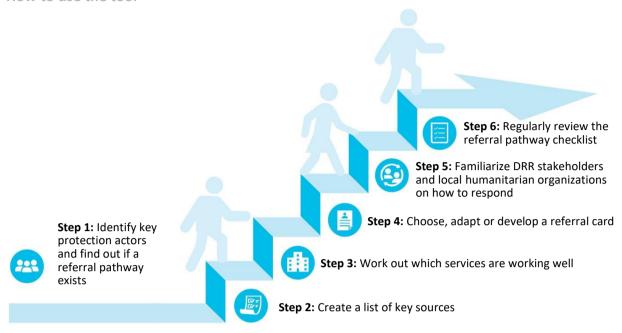
This tool is designed to support DRR and humanitarian actors to:

- Map key protection actors
- Develop a referral pathway
- Help actors coordinate to create an efficient and safe referral pathway

#### When to use the tool

This tool should be used during emergency preparedness activities. However, it is important to update pathways and mappings regularly, particularly after an emergency or disaster. This is because crises often worsen existing protection risks. Services can also be severely affected.

#### How to use the tool



#### Who to involve?

The process should involve national and local protection actors and local communities. It is important to share the information with all staff.

# **Key definitions**

**Confidentiality:** This involves an obligation to make sure that information about a person is not shared without explicit permission.

**Referral pathway:** A referral pathway is a safe way for people to find different kinds of help, e.g., medical care or help from the police.

Survivor: This is a person who has been harmed, sexually exploited or abused.

**Survivor-centered approach:** This is an approach that puts survivors' wishes, safety and well-being at the center of the process, at all times and in all situations.

# Step 1: Identify key protection actors and find out if a referral pathway exists

- Find out who is the lead in providing protection services in the area. This could be the government, a United Nations (UN) body, a local or international NGO, private sector groups or community-based organizations (CBOs). Check whether the Protection Cluster and Sub-Clusters are activated; if so, contact them and ask what you should do next.
- Ideally, the government and/or Protection Cluster will map available protection services and develop a referral pathway.<sup>26</sup> If a government or UN body is the lead in protection services, contact them for guidance or ask for a referral pathway.
- If there is no referral pathway, find out who is responsible for protection concerns or has expertise in these areas. Do this by researching the roles of different organizations. If necessary, contact government institutions and local authorities to help you find relevant actors.

<sup>26</sup> For an example of a referral pathway from the Rohingya response in Cox's Bazar, Bangladesh, see: https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/referalpathway 220417.pdf.

- Think through who the actors are, their relationships and how much influence they have and where. Do an actor analysis for each protection problem (use data on protection risks using a bubble analysis).<sup>27</sup> Consider different actors, particularly at the local level, such as:
  - CBOs
  - NGOs
  - Local media
  - National and local women's organizations
  - Clubs and groups
  - Academics
  - Social networks
  - Village or community leaders
  - Charities
  - Religious institutions
  - Local businesses
  - Unions
  - Local government officials or departments
  - Police
  - Social services
  - The UN
  - The International Committee of the Red Cross
- Find out with whom you should coordinate. This could include actors who either can respond or have the mandated authority to respond. The more local the referral pathway is, the more useful it will be for people with protection needs. However, only larger actors may be mandated to respond to certain protection issues.

# Step 2: Create a list of key sources

- Use the mapping to create a list of the key actors to meet. Start with larger national actors with specific protection mandates that oversee protection services rather than offering them directly, including:
  - National governments
  - The UN
  - International non-governmental organization (INGOs)
- Prepare another list of service providers for a second round of interviews. These could be smaller local actors that work on specific protection needs, such as:
  - Local governments
  - CBOs
  - Private sector organizations
  - Women's shelters
  - Health services
  - Women's and children's helplines
  - · Family tracing and reunification services
  - Services for persons with disabilities

Refer to the Disaster Responders Mapping from the Community-Led Disaster Risk Management (CLDRM)+ guide.

# Step 3: Work out which services are available and working well

- Use <u>Tool 1A</u> to get an overview of the service providers that the larger protection actors promote. If there is more than one lead or influential national protection actor, try to contact them all.
- Next, contact service providers directly, using <u>Tool 1B</u>, to talk about their services. It is important to understand how they work and who can use their services (e.g., are they child-friendly? are they accessible to people with disabilities? which languages do staff there use?).
- Finally, conduct a community-led analysis to find out about formal and informal protection services using Tool 2.

<sup>&</sup>lt;sup>27</sup> For an example of a bubble analysis see Annex 2 of: Catholic Relief Services. <u>Protection Risk Analysis: Step-by-Steph How-To Guide for Country Program and Partner Project Teams</u>. 2019.

Consider how hazards affect service providers themselves and whether they are resilient enough to keep offering services during or after an emergency or disaster.

# Step 4: Adopt, adapt or develop a referral card

- Use the information from <u>Tool 1A</u>, <u>Tool 1B</u> and <u>Tool 2</u> to list the service providers in a table. If possible, develop a referral card (<u>Tool 3</u>), update it regularly, especially after emergencies or disasters.
- Where possible, share your referral card with service providers to check if it is accurate.
- Translate referral cards into local languages or the preferred languages of program participants.
- Print the referral card in a pocket-sized format. Make sure all staff and volunteers have a copy with them during activities. Consider other ways to share this information—such as posters, social media or phone messages.

# Step 5: Familiarize DRR stakeholders and local humanitarian organizations on how to respond

Familiarize DRR stakeholders and local humanitarian organizations with the following information:<sup>28</sup>

- If a person affected/survivor tells you about an incident, introduce yourself. Ask how you can help. Remember the importance of respect, safety, confidentiality and non-discrimination.
- Share correct information about available services.
- If they give permission, give them information about relevant resources and services—including how, when and where to access them, focal points at the services, safe transport options, etc.
- Do not share information about a survivor or their experience with anyone unless they give you explicit and informed consent. Do not record details of the incident or personal information about the survivor.
- If someone other than the survivor (for example, a family member) shares information about someone who has experienced harm, abuse or exploitation, give the former up-to-date and correct information about services and support that are available to the survivor. Encourage them to share this information safely and privately with the survivor. DO NOT approach the survivor yourself. If the survivor is a child, please report the case to the lead child protection actor.

# Step 6: Regularly review the referral pathway checklist

- During periodic reviews, use the questions in **Tool 4** to adjust as necessary.
- Contact national protection actors and service providers regularly to find out if anything has changed. This is particularly important after a disaster. It will help you to understand whether any groups are finding it hard to access services and how to improve this (for example, by changing the language and format of communications or making adjustments for people with disabilities).
- Share the updated referral pathways with staff.

■ If there are any concerns about the safety or quality of services or any barriers to access, tell the service provider and any other relevant protection actor. If the Protection Cluster is activated, follow up with it for a quality check on services.

<sup>&</sup>lt;sup>28</sup> You can find more advice on what to say and what not to say on pages 7–10 of: Inter-Agency Standing Committee. <u>How to support survivors of gender-based violence when a GBV actor is not available in your area</u>. 2015.

#### Tool 1A: Sample discussion guide—national protection actors

#### Introduction

Introduce yourself and your organization, and present the purpose of the discussion:

- You are developing or updating a referral card for staff serving people and communities. This will help you give people with protection needs accurate information on how to access essential protection services.
- In this conversation, they will give you some personal information—such as mobile numbers and addresses. As far as they are aware, you want to make sure this does not violate local privacy laws.
- You are asking for their input and expertise on protection services that are available nationally or locally.

#### Questions

Please give me an overview of protection services you recommend for different types of protection issues. For example:

Please note: If a referral pathway already exists, ask if it has been updated after a disaster. If not, ask if it will be updated. If the answer to both these questions is "no," follow the rest of the process below. Use the information

- Sexual and gender-based violence
- Child protection
- Family separation
- Trafficking in persons

below to record the details of each protection service/organization.

What checks have you done on these services to understand if they are safe and accessible to someone regardless of gender, age, legal status and diversity factors, etc?<sup>29</sup>

What challenges do these protection services face? Are any national plans being developed to address these challenges?

How could a disruption—such as a disaster—affect these services? Do the providers have contingencies built in for disaster situations?

Are there any service providers you do not recommend? Why?

<sup>&</sup>lt;sup>29</sup> For further guidance, see: UNICEF. <u>Availability, Accessibility, Acceptability, Quality framework: A tool to identify potential barriers to accessing services in humanitarian settings.</u> 2019.

Add a new table for each service provider mentioned:

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

#### Tool 1B: Sample discussion guide—local protection services providers

#### Introduction

- Introduce yourself and your organization and present the purpose of the discussion.
- Explain that you are developing or updating a referral card for staff serving people and communities so that people with protection needs can receive accurate information on how they can access important protection services.
- Say you are asking for their input and expertise on the services that are operating in response to [insert the particular issue this service focuses on]. You are also interested in any changes there have been after an emergency or disaster.

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Are your services continuing to work? Have you changed anything (e.g., is it easier or more difficult for people to access your services; have you changed your opening hours; do we have your permission to share these details with our program participants)?
Who can access your services (look for any access restrictions based on gender, age, disability, ethnicity, religion, legal status, etc.)? Do people have to pay to access your services? What language(s) are available for services? If users need information on the services (e.g., after-care guidance, instructions for taking medicines), which languages and format are offered?
What safeguarding procedures do you have in place?
If you receive a report of another protection issue you cannot deal with directly (e.g., child separation, trafficking, psychosocial support), to what services do you refer people? Do you have specific contacts or focal points in those services? How often do you update your contacts?
If we hear of any positive or negative experiences or suggestions about your service, how do we pass them on to you?
Have emergencies or disasters ever disrupted your services? [mention any specific examples if possible.] If yes, wer you able to overcome these problems? Did the challenges affect how you provided services, particularly to vulnerable groups (specifically women and girls, older persons or persons with disabilities)?

#### Tool 2: How to map formal and informal protection services and structures in disasteraffected communities

Adapted from: Protection Mainstreaming Working Group. *Protection Mainstreaming Facilitation Guide*. 2018, and Catholic Relief Services. *Community Led Disaster Risk Management+ Guidance*. 2022.

#### Step 1: Preparing the exercise

Work out the location covered by the mapping (e.g., a rural community, village or camp).

#### Step 2: Introducing the exercise and discussion

#### Welcome and introduction

- Welcome participants and invite them to introduce themselves.
- Introduce the facilitator and notetaker, including names, organization and positions.

#### **Step 1: Explain the process**

- In a language participants understand, explain:
- The purpose of the discussion, how the participants were chosen, and how you will use the information that you collect.
- The exercise is to develop a conceptual map, not a physical one. The aim is to discover the formal and informal groups and organizations that exist in and around the community.
- There are no right or wrong answers.
- Participation is voluntary. Participants can refuse to participate or stop at any point, with no consequences. Their answers will not affect whether they receive services.
- You do not expect people to talk about specific incidents of violence. They should never reveal any identifiable personal information—such as the names of survivors or perpetrators.
- The team will take notes and may collect some data about participants but will not share it unless participants agree.
- If anyone has any confidential concerns or complaints, they can share them with the facilitator after the session.
- You can share a consent form a few days before the exercise for children, people with disabilities and other vulnerable groups. Consider explaining the form in person if a written text is difficult for them to understand.
- Help all groups express themselves—including older people, people with disabilities, religious groups, ethnic minorities, people of different genders and speakers of different languages. Consider holding separate mapping exercises for different groups.

#### **Step 2: Clarify terminology**

■ Introduce key terms/language so that everyone understands the terms in the same way. You can introduce terms at the beginning of the discussion or gradually as you move from topic to topic. Please see the Glossary (PART 5) for terms used, and make sure that you have found the most suitable translation for each term.

#### Step 3: Conduct the mapping exercise

#### Part A

- Ask participants to think about the following questions: What do you do when you face a protection threat before or during a disaster? Who do you go to for help?
- In the middle of a large sheet of paper or on the ground, draw a large circle with a sick person inside it. Then draw three more circles around the central one. Explain that:
  - The inner circle represents the **survivor**, the person who has been harmed.
  - The next circle represents the people closest to that person. They might be the people the survivor turns to first for support or help (e.g., their mother, brother, sister, father or friend).
  - The next circle represents those **closer** to the survivor. These might be people, groups or organizations the survivor may go to next for support or help (e.g., a teacher, nurse, doctor, priest, community leader, women's group or midwife).
  - The outer layer represents those who are only **close** to the survivor. These are people, groups or organizations in the community that the survivor has a more formal relationship with (e.g., the police, health clinics, lawyers and schools).



CRS SAFE AND DIGNIFIED PROGRAM

- Ask participants to think about specific people for each circle in their local area. For example, would parents, grandparents or siblings be included in the closest ring? Would healthcare providers or education actors be in the close ring?
- Record information about the people, groups or organizations in layers two (closer) and three (close). You can compare it later with the information the protection actors give you in Tools 1 and 2 to see if they overlap or if there are any differences.

#### Part B

- Draw a line down the middle of each circle to divide them into two halves. Explain that the left half refers to "pre-disaster" and the right half refers to "post-disaster."
- Ask participants to place the actors they identified in part A inside the circle and decide if they play a key role "pre-disaster," "post-disaster event," or both.

#### Step 4: Concluding the discussion and following up

- Go back over everything that participants shared and ask if anything is missing.
- Photograph or record the output of the session so you can share this information with the people who are developing the referral pathway.
- Give the participants contact information in case they want to share anything else with the facilitation team.
- Thank participants for their time and ideas.
- Inform the relevant person (e.g., your protection focal point) of any sensitive issues or complaints that were raised and offer contact information.

#### **Tool 3: Referral card template**

NOTE: This list is not exhaustive. Please expand and adjust according to context.

#### **Referral of Protection Cases**

### Use if you are informed of a protection incident (violation of rights, gender-based violence, etc.)

- 1. Provide a **safe** and **caring** environment for the survivor and respect his/her wishes and the principle of **confidentiality**.
- 2. Ask what are his/her immediate needs.
- 3. Provide clear and honest information about available services.

#### NO REFERRAL WITHOUT explicit consent, except:

- 1. When there is a threat to the life of the survivor
- 2. When a survivor threatens to cause serious harm to another person
- 3. In case of suspicion of abuse or neglect towards a child and in child's best interest

In the event of rape, inform the victim of the importance of accessing medical care within 72 hours.

If the survivor agrees and requests, ask for his/her informed consent and carry out referrals and support for accesssing services.



ı	If the survivor has given <b>consent</b> , the <b>immediate response</b> should be:								
I	Sexual violence	Physical	violence	Safety risk Psychological vio		Psychological violence			
	1					<b>1</b>			
ı	Prioritize health care			Prioritize	safety	Psychosocial support			
	1				l				
ſ	Hospital or Healthcare NGO			Poli	ce	Counselling/Mental health care			

#### What services are available?

S	G	В	١

Update : DATE

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### MHPSS

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### Health/Nutrition

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

### Protection and Legal assistance/advice

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours: Languages services

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### Education

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours: Languages services

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### WASH

#### ORGANIZATION

**Point focal**: Name, contact details (phone/email) **Services provided**:

Target group:
Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### **Tool 4: Referral pathway checklist**

Adapted from: Trócaire. *Humanitarian Protection Handbook*. 2014.

CHEC	KLIST	YES/NO
1	Is there an existing referral pathway? Was it developed by the government or Protection Cluster (or Sub-Cluster)?	
2	Are existing referral pathways reliable and responsive during emergencies?	
3	Is it easy for community members to access and understand information about the referral pathways?  • Are different communication channels used to share this information?  • Which languages are used to share this information?	
4	Are there referral pathways set up in evacuation centers, temporary shelters or isolation facilities?	
5	Do local disaster risk reduction and management offices use a standard referral pathway for disaster victims?	
6	If there are no referral pathways, have you done a mapping to find all the key actors who offer services or who have influence over a particular protection problem?	
7	Does the referral process ensure informed consent (i.e., clear and full permission from survivors) and a survivor-centered approach?  • Do survivors fully understand what they are agreeing to, including what options they have and any risks?  • Do survivors' needs and preferences take priority? Does the survivor take part in decisions that affect them? Are they treated with respect and dignity?	
8	Have you ensured that everyone in the organization (from drivers to the head of office) understands when and how to orient people to these services? Does everyone understand organizational limits, including what cases the organization can and cannot get involved in?	
9	Do you make sure that staff members know they should never share sensitive information with anyone who is not directly involved in a survivor's care unless they have the survivor's permission?	
10	Does your referral process ensure that your organization shares information with specialist organizations so they can take further action?	
11	Are you giving communities enough information about where they can access other agencies directly?  • Which languages and communication channels do you offer?	
12	Are you considering survivors' culture, age, ability, language and gender?  • Does all communication happen in a safe place?  • Are survivors' rights to make their own decisions respected?	
13	Are you following existing standard operating procedures at all times?	

#### **Further resources**

**IASC**. April 6, 2020. *Identifying and Mitigating Gender-based Violence Risks within the COVID-19 Response*.

**Gender Based Violence AOR, Global Protection Cluster**. 2020. <u>Rapid Assessment Remote Service Mapping Template</u> (COVID-19).

**IASC**. 2015. <u>How to support survivors of gender-based violence when a GBV actor is not available in your area: A step-by-step pocket guide for humanitarian practitioners.</u>

IFRC. 2020. Hotline in a Box. IFRC.

**CRS**. 2021. Strengthening Partners in Protection Against Sexual Exploitation and Abuse—A Toolkit for Local and National Organizations.

#### HO 17: WHO Psychological First Aid Pocket Guide

#### HANDOUT 17. WHO PSYCHOLOGICAL FIRST AID POCKET GUIDE

Please refer to the World Health Organization (WHO). <u>Psychological first aid: Guide for field workers</u>. 2011. Other languages are available.

#### What is PFA?

Psychological First Aid (PFA) describes a humane, supportive response to a fellow human being who is suffering and who may need support. Providing PFA responsibly means:

- Respect safety, dignity and rights
- Adapt what you do to take account of the person's culture
- Be aware of other emergency response measures
- Look after yourself

#### **Prepare**

- Learn about the crisis event
- Learn about available services and supports
- Learn about safety and security concerns
- PFA ACTION PRINCIPLES:



#### Look

- Check for safety
- Check for people with obvious urgent basic needs
- Check for people with serious distress reactions



#### Listen

- Approach people who may need support
- Ask about people's needs and concerns
- Listen to people and help them feel calm



#### Link

- $\blacksquare$  Help people address basic needs and access services
- Help people cope with problems
- Give information
- Connect people with loved ones and social support

#### **Ethics**

Ethical dos and don'ts are offered as guidance to avoid causing further harm to the person, to provide the best care possible and to act only in their best interest. Offer help in ways that are most appropriate and comfortable to the people you are supporting. Consider what this ethical guidance means in terms of your cultural context.

DOs	DON'Ts
■ Be honest and trustworthy.	■ Don't exploit your relationship as a helper.
Respect people's right to make their own decisions.	Don't ask the person for any money or favor for
■ Be aware of and set aside your own biases and	helping them.
prejudices.	Don't make false promises or give false information.
Make it clear to people that even if they refuse help	Don't exaggerate your skills.
now, they can still access help in the future.	Don't force help on people and don't be intrusive or
Respect privacy and keep the person's history	pushy.
confidential, if this is appropriate.	Don't pressure people to tell you their story.
Behave appropriately by considering the person's	Don't share the person's story with others.
culture, age and gender.	■ Don't judge the person for their actions or feelings.

#### People who need more than PFA alone

Some people will need much more than PFA alone. Know your limits and ask for help from others who can provide medical or other assistance to save life.

#### People who need more advanced support immediately

- People with serious, life-threating injuries who need emergency medical care
- People who are so unwell that they cannot care for themselves or their children
- People who may hurt themselves
- People who may hurt others

## HO 18: Action Plan Template HANDOUT 18. ACTION PLAN TEMPLATE

CORE COMPONENT						
Indicator(s)						
Findings from rating of indicator(s)						
Planned action to align with indicators	Start date	End date	Responsible person	Resources required	Support available from partner/donor	Cost estimate

CORE COMPONENT						
Indicator(s)						
Findings from rating of indicator(s)						
Planned action to align with indicators	Start date	End date	Responsible person	Resources required	Support available from partner/donor	Cost estimate

#### TT 4: Power Walk Characters

#### TRAINING TOOL 4. POWER WALK CHARACTERS

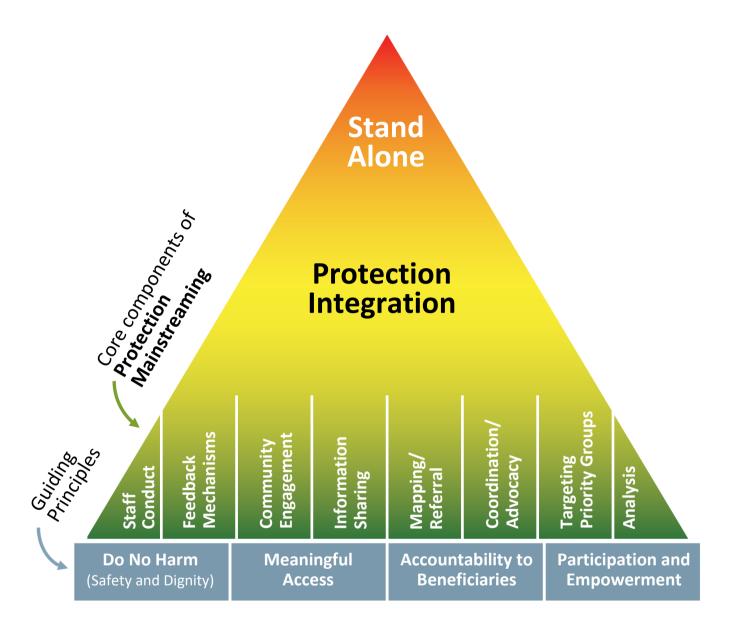
Adapted from Church World Service. Safety with Dignity, Action Aid A field manual for integrating community-based protection across humanitarian programs (2003) <a href="https://actionaid.org/sites/default/files/protection">https://actionaid.org/sites/default/files/protection</a> manual.pdf.

Member of a Religious Minority	65-Year-Old Male Farmer with a Wife and Six Children Living in a Region that Often has Extreme Flooding	Religious Leader Working in a Peaceful Community	15-Year-Old Female Head of Household in a Rural Village with Two Younger Sisters
14-Year-Old Second Wife of a Polygamous Husband	Refugee from a Neighboring Country	22-Year-Old Male Former Child Soldier	Male Police Officer
Permanently Disabled Survivor of an Earthquake	Member of Parliament	45-Year-Old Widow with Six Children	NGO Employee (Expatriate Staff)
Person Displaced by a Hurricane	Child Separated from Their Parents in Floods	NGO Employee (Local Staff)	Successful Male Business Owner
17-Year-Old HIV- Positive Boy Living on the Streets of a Large City	16-Year-Old Single Mother and Sex Worker	10-Year-Old Deaf Girl in an Orphanage	Humanitarian Worker with the United Nations

#### TT 5: Protection Triangle

#### TRAINING TOOL 5. PROTECTION TRIANGLE

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. (2018: 15).



# Latrines built with a ramp for wheelchairs Education project with a feedback and complaints box Distribution of food in 5kg bags so older people can carry them Early warning systems that include different ways of sharing information Counseling services for survivors of gender-based violence Cash transfers for female heads of households to reduce their vulnerability to sexual exploitation Advocacy with government authorities on forced evictions of displaced people

#### TT 6: Pan Island Preparedness (Scenario A: Earthquake)

#### TRAINING TOOL 6. PAN ISLAND PREPAREDNESS (SCENARIO A: EARTHQUAKE)

#### **Background**

Your disaster risk reduction (DRR) organization is leading an earthquake preparedness project on Pan Island, a country in the Atlantic Ocean. It is a low-income country, and there is often food insecurity. The country's main economic activity is farming. Families also get important income from illegal logging in the highlands in the north. Illegal logging has increased the risk of landslides and mudslides during the wet season. The 2-month rainy season has just started.

Pan society is divided strictly according to social status and gender. It is difficult for non-governmental organizations (NGOs) to get information from and about vulnerable groups. Cellphone coverage is very high, but few women own a phone. The project coverage area has 7,890 households. You have some information about the numbers of men and women but have no data on the age groups nor how many people have disabilities. There is a lot of stigma around disabilities. Your organization does not want to cause harm by collecting data on a sensitive topic. Your DRR organization is well known in Pan. It has worked there for 15 years and has well-established partnerships in the country, especially with regional and national governments.

#### **Project activities**

You will train 200 DRR focal points from the communities on earthquake preparedness. These DRR focal points will then train households. Trainings will cover how families can prepare by:

- Developing household evacuation plans
- Stocking up on non-perishable food
- Creating "Go Bags" for emergency evacuations

Nearly all the DRR focal points are male because more men in the communities are literate and few women applied to participate.

The project also offers small repairs and reinforcement projects for vulnerable homes and structures. The male focal points will oversee choosing households for these projects and distributing Go Bags with emergency preparedness materials. Households will be able to use a preparedness checklist and get help from an app on their phones.

As part of the project, your organization is working with the regional government to develop an early warning system that sends information by short message service (SMS). Your organization also set up some evacuation centers. These are several hours' walk from most communities. Most community members will be able to manage these distances because they are used to walking long distances to markets. Evacuation centers do not have lighting or facilities for people with disabilities. The centers can get very crowded.

Your organization has found evacuation center volunteers who are eager to support. They have already been trained through the project. They have not been trained on staff conduct and how to refer program participants to support services. However, they are very knowledgeable about DRR.

In the past, there were rumors that gender-based violence was a problem at evacuation centers operated by your organization. You are not sure if they were true because your organization does not have a way to formally collect feedback from program participants.

#### TT 7: Pan Island Preparedness (Scenario B: Flooding)

#### TRAINING TOOL 7. PAN ISLAND PREPAREDNESS (SCENARIO B: FLOODING)

#### **Background**

Your disaster risk reduction (DRR) organization is leading a flooding preparedness project on Pan Island, a country in the Atlantic Ocean. It is a low-income country. Heavy monsoon rainfall often causes extreme flooding. The country's main economic activity is farming, but some families also get important income from illegal logging in areas around the capital, Rad. This illegal logging has increased the risk of landslides and mudslides during the wet season.

You expect the month-long rainy season to start next month. Informal settlements are very vulnerable to flooding and mudslides. Many people have been displaced in recent years. Coastal communities often live in areas with hazards. For example, many people live in houses built on "banked" land reclaimed from the sea. This makes them vulnerable to flooding.

Pan society is divided strictly according to social status and gender. It is difficult for organizations to get information from and about vulnerable groups. This makes it difficult provide the right help to people. Cellphone coverage is very high, but few women own a phone. The project coverage area has 7,890 households. You have some information about the numbers of men and women but no data on the age groups nor how many people have disabilities.

Your DRR organization is well known in Pan. It has worked there for 15 years and has well-established partnerships in the country, especially with regional and national governments.

#### **Project activities**

You will offer training on flooding preparedness to 200 DRR focal points from local disaster management committees. These DRR focal points will then share information in communities and work with them to map hazards in their area. The trainings will explain:

- How households can prepare (e.g., by securing essential documents)
- How to conduct community mapping
- How to plan an evacuation

Almost all the DRR focal points are male, because more men in the communities are literate and few women applied to participate. These male focal points will be responsible for sharing information with households and helping them develop household evacuation plans. The DRR focal points are also leading community hazard-mapping activities. You know that few women have actively participated in these in the past.

The project also offers small repair and reinforcement projects for vulnerable homes and structures. The male focal points will be deciding which households will receive this help. They will help give out the materials.

As part of the project, your organization has developed an early warning system with the regional government. It sends information and alerts via short message service (SMS). Your organization has also set up several evacuation centers. It was difficult to find space for the centers, so your organization had to choose locations without community input. Many are long distances from Pan communities. Most community members will be able to manage these distances because they are used to walking long distances to markets. Evacuation centers can get very crowded. They do not have facilities for people with disabilities.

Your organization has found evacuation center volunteer managers who are eager to support. They have already been trained through the project. They will also help give out emergency non-food items in case of a disaster. However, they have not been trained on staff conduct and how to direct program participants to support services, but they are very knowledgeable about DRR.

In the past, there were rumors that sexual exploitation and abuse were a problem at evacuation centers operated by your organization. You are not sure if the rumors were true, because your organization does not have a way to formally collect feedback from program participants.

#### TT 8: Pan Island SitRep (Scenario A: Earthquake)

#### TRAINING TOOL 8. PAN ISLAND SITREP (SCENARIO A: EARTHQUAKE)

#### **Key Priorities**

- An earthquake of magnitude 7.5 hit the island of Pan at 10:00 a.m. yesterday.
- There are reports of widespread damage to houses and roads. There is limited access, especially to remote areas, due to landslides.
- It is not clear yet how many people are affected, but the estimate is around 80,000. This number may change as the situation develops and more information arrives.

#### **Background**

The island of Pan is in the Atlantic Ocean. It is a low-income country that often experiences food insecurity. The country's main economic activity is farming. Many families also get important income from illegal logging in the highlands in the north. This has increased the risk of landslides and mudslides during the wet season. The monthlong rainy season is expected to start next month.

Pan society is divided strictly according to social status and gender. It is difficult for non-governmental organizations (NGOs) to get information from and about vulnerable groups. This makes it harder to provide the right help for people. Cellphone coverage is very high, but few women own a phone.

Your disaster risk reduction (DRR) organization has a high profile in Pan. It has worked there for 15 years and has well-established partnerships in the country, especially with regional and national governments.

#### Situation overview

At 10:00 a.m. yesterday, an earthquake measuring 7.5 on the Richter scale hit the northern coast of the island of Pan. There have been several aftershocks. The epicenter was 5km from the capital, Rad. Around 50,000 houses have been affected, and 208 schools have been destroyed partially or completely. It is thought that around 80,000 people have been directly affected by the earthquake. The official death toll is 450 so far. Initial reports show few communities had preparedness and response plans. People were not aware of evacuation procedures. The earthquake-affected people living in vulnerable houses and structures the most. Most DRR activities did not focus enough on early warning and evacuation.

There are reports that many people need surgery for injuries caused by the earthquake. In some areas, more women were killed or injured because they were at home while men were at work and in open spaces like fields and markets. It is also thought that more children under 9 years of age and adults over 60 years of age have been killed. Some groups (children, older people and people with disabilities) did not receive information about earthquake and evacuation procedures beforehand. It was also difficult for them to follow instructions without help. Many people are missing.

Reaching affected areas is difficult because of the damage that the earthquake caused. There are reports that many displaced people are living in schools or churches. Many others are staying with family and friends in nearby villages. Some families who had to leave their homes are living in tents on the outskirts of Rad on government land.

Security was good before the earthquake. However, in the last few days, there have been reports of looting. There has been a security problem with a lorry delivering NGO assistance.

#### **Humanitarian response**

Immediate needs are likely to be for shelter, food, water, non-food items and sanitation facilities. Other agencies are already giving people non-food items and food. The largest gaps are shelter, water, sanitation and hygiene (WASH). Host families are struggling themselves and may not be able to help the displaced people for long.

Your DRR organization is working with an international NGO. This NGO is giving shelter assistance and managing evacuation centers. You will support the shelter response because of your organization's local knowledge and networks. Another part of the response will involve working with the community on disaster preparedness actions because people are worried about more aftershocks and landslides.

#### TT 9: Pan Island SitRep (Scenario B: Flooding)

#### TRAINING TOOL 9. PAN ISLAND SITREP (SCENARIO B: FLOODING)

#### **Key priorities**

- Two weeks of heavy monsoon rainfall have caused three landslides and severe flooding.
- They have killed at least 508 people. Around 5,000 people have been affected. These numbers will probably increase.
- Heavy rain is expected to continue. There may be more mudslides and landslides.
- Initial assessment suggests the main needs are food, shelter and non-food items.

#### **Background**

The island of Pan is in the Atlantic Ocean. It is a low-income country, and heavy monsoon rainfall often causes extreme flooding. The country's main economic activity is farming. Many families also get important income from illegal logging in the areas around the capital, Rad. This has increased the risk of landslides and mudslides during the wet season.

You expect that the month-long rainy season will start next month. Informal settlements are very vulnerable to flooding and mudslides. A lot of people have been displaced in recent years. Communities living on the coast often live in areas with hazards. For example, many people live in houses built on "banked" land reclaimed from the sea. This makes them vulnerable to flooding.

Pan society is divided strictly according to social status and gender. It is difficult for non-governmental organizations (NGOs) to get information from and about vulnerable groups. This makes it difficult to provide the right help for people. Cellphone coverage is very high, but few women own a phone.

Your disaster risk reduction (DRR) organization is well known in Pan. It has worked there for 15 years and has well-established partnerships in the country, especially with regional and national governments.

#### Situation overview

Two weeks of heavy rain have caused three major landslides around Rad. Heavy rains are expected to continue for the next 24 hours. The number of deaths has reached 508. At least 5,000 people have been affected. There is a lot of damage, but only in certain places. In areas that are vulnerable to floods, several roads are blocked by fallen trees. There are increasing numbers of reports of flash floods and mudslides that could be deadly.

The government is leading a major emergency rescue, evacuation and response operation in Coastal Zones 1 and 2 of Rad.

People were evacuated before the flooding. Around 3,000 vulnerable people living near the sea were moved to evacuation centers. However, some groups (including people with disabilities and older people) did not receive information about the evacuation procedures beforehand, and it was difficult for some to follow the procedures without help. Many are stranded. Agencies have not yet reached them with assistance.

Early warning alerts did not reach some areas near Rad because cellphone towers were flooded. Many people were surprised by the landslides. They did not leave or have access to emergency shelters or supplies. Many have lost their identity documents.

The Pan Red Cross says the main needs are food, water and non-food items (including clothing, blankets and lights). Rapid needs assessments will collect more information. Reaching affected locations is difficult. There are reports of displaced people (IDPs) living in schools and churches. Many are staying with family and friends in nearby villages.

Security was good before the flooding. However, in the last few days, there have been many reports of looting. There has been a security problem with a lorry delivering NGO assistance.

#### **Humanitarian response**

The immediate needs are shelter, food and non-food items. Other agencies are already giving people non-food items and food. The largest gap is shelter. Host families are struggling themselves and may not be able to help the displaced people for long.

Your disaster risk reduction (DRR) organization is partnering with an international NGO. This NGO is giving shelter assistance and managing evacuation centers. You will support the shelter response because of your organization's local knowledge and networks. Another part of the response will involve working with the community on disaster preparedness actions because people are worried about flash floods and landslides.

#### TT 10: Character and Feedback Cards

#### TRAINING TOOL 10. CHARACTER AND FEEDBACK CARDS

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. 2018.

There are no feminine hygiene products or alternatives available.
Something bad has happened to you during the project. You feel embarrassed and don't want to talk about it.
You are not included in the program, but you don't know why.
The project site is too far, and rains have made the road bad.
The staff on the project are rude.
You don't like the items distributed by another organization in the same area.
The baby goats given as part of the project need six months of feeding before you can sell them. You don't have money for the feed.
You heard you must pay money to a certain member of staff if you want to be included in the program.
The project is great. You just want to let the team know that.

## **AGREE**

# DISAGREE

#### TT 12: Sexual Exploitation and Abuse Scenarios

#### TRAINING TOOL 12. SEXUAL EXPLOITATION AND ABUSE SCENARIOS

- 1. A local maintenance company is working in a camp. A staff member from this company tries to rape a female refugee in the camp after the company's working hours. The man used his work identification (ID) access card to get into the camp.
- 2. One of the volunteers at the local city disaster risk reduction (DRR) office refuses to include a male program participant in a training on safer building practices unless that man's sister has sexual intercourse with him.
- 3. A driver for an international non-governmental organization (NGO) regularly uses the organization's car to give village schoolboys a ride to school in a neighboring town. In exchange, he takes photographs of them posing naked.
- 4. A local disaster risk reduction (DRR) Field Officer touches a 6-year-old girl inappropriately during community earthquake drills.
- 5. The female human resources (HR) boss of a DRR organization refuses to hire a young man applying to be program assistant unless he has sexual intercourse with her.
- 6. An evacuation shelter volunteer tricks a female program participant into following him into a deserted warehouse and rapes her. He says that if she reports him, he will tell her husband they are having an affair.
- 1. A local maintenance company is working in a camp. A staff member from this company tries to rape a female refugee in the camp after the company's working hours. The man used his work identification (ID) access card to get into the camp.
- 2. One of the volunteers at the local city disaster risk reduction (DRR) office refuses to include a male program participant in a training on safer building practices unless that man's sister has sexual intercourse with him.
- 3. A driver for an international non-governmental organization (NGO) regularly uses the organization's car to give village schoolboys a ride to school in a neighboring town. In exchange, he takes photographs of them posing naked.
- 4. A local DRR Field Officer touches a 6-year-old girl inappropriately during community earthquake drills.
- 5. The female human resources (HR) boss of a DRR organization refuses to hire a young man applying to be program assistant unless he has sexual intercourse with her.
- 6. An evacuation shelter volunteer tricks a female program participant into following him into a deserted warehouse and rapes her. He says that if she reports him, he will tell her husband they are having an affair.

## TT 13: Examples of Code of Conduct Breaches TRAINING TOOL 13. EXAMPLES OF CODE OF CONDUCT BREACHES

Cut these out			
A male team member comments on a "pretty girl" during an earthquake drill.			
There are rumors that a project staff member added his girlfriend's name to the list of program participants.			
A program participant in your disaster risk reduction preparedness project is told she must have sex with a contracted vendor to get her home repaired.			
A male volunteer meets a 16-year-old female program participant in a bar for a drink and takes her to his house for sexual intercourse.			

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. Protection Mainstreaming Training. 2018.

17-year-old girl (gender-based violence survivor)	Police officer	
Court prosecutor	Lawyer	
Community leader	Doctor	
Nurse	Local community services worker	
UNHCR Protection Officer	UNHCR Community Services Officer	

#### TT 15: Safe Responses Cards

#### TRAINING TOOL 15. SAFE RESPONSES CARDS

Adapted from: Lee A, Newman S, Pasztor G, Sutton K. <u>Protection Mainstreaming Training Package</u>. Global Protection Cluster; 2014.

Ask the woman if she is hurt.	Ask for details of what happened.	
Ask survivor for details of when and where it happened.	Ask who is responsible for attacking her.	
Ask what specific help/assistance she needs. Ask if she wants you to contact someone to get support or help.	Give the person contact information for health, counseling, or other relevant services.	
Don't say anything at the time, but later call the police from somewhere private.	Report the incident to your manager or protection staff member and ask for advice.	
Do nothing if it is a domestic or family/community matter.	Check safety: your safety, the safety of other staff members and the safety of the affected person and the community.	

#### TT 16: Dos and Don'ts of Psychological First Aid

#### TRAINING TOOL 16. DOs AND DON'TS OF PSYCHOLOGICAL FIRST AID

Adapted from: World Health Organization. <u>Psychological first aid: Guide for field workers</u>. 2011. Other languages are available.

#### **DOs**

- Be honest and trustworthy.
- Respect people's right to make their own decisions.
- Be aware of and set aside your own biases and prejudices.
- Make it clear to people that even if they refuse help now, they can still access help in the future.
- Respect privacy and keep the person's story confidential, if this is appropriate.
- Behave appropriately by considering the person's culture, age and gender.

#### **DON'Ts**

- Don't exploit your relationship as a helper.
- Don't ask the person for any money or favor for helping them.
- Don't make false promises or give false information.
- Don't exaggerate your skills.
- Don't force help on people, and don't be intrusive or pushy.
- Don't pressure people to tell you their story.
- Don't share the person's story with others.
- Don't judge the person for their actions or feelings.

## Part 1: 1.3 Community-Led Disaster Risk Management + Protection Facilitation Guide

#### Introduction

As natural hazards, climate change impacts and public health emergencies continue to evolve and overlap, there is an urgent need for disaster preparedness and protection to be integrated in all disaster risk mitigation strategies.

The impact of one disaster event can have "compounding effects" on vulnerable communities due to other risks already present in a specific area. For example, flooding in an underserviced area with limited waste management services or drainage infrastructure could lead to a variety of public health impacts. This in turn could increase risks for people with disabilities or chronic illnesses in the affected area. We know these as "compounding risk" events.

If we want to do our best to protect communities, we need to improve how we prepare, plan and mitigate the impacts of disasters—especially in areas experiencing compounding risks.

This will help ensure the safety, welfare and dignity of all people—especially people who belong to marginalized populations and who are crisis-vulnerable. People who need specific support include older people, pregnant women and teens, informal settlers and people with disabilities, among others.

#### **Purpose**

To help guide better disaster preparation, planning and mitigation, CRS has created this *Community-Led Disaster Risk Management + Protection Facilitation Guide (CLDRM+)*.

The guide is written for people who develop disaster risk reduction and management (DRRM) plans at the community level. It guides its users to make sure that the processes and procedures in disaster risk reduction and management are inclusive and participatory. This means including different community stakeholders in the development of the preparation, planning and implementation of actions to mitigate the risks associated with prioritized challenges in vulnerable communities. The guide supports a *multi-dimensional approach* to risk assessment and management by identifying which hazards and protection risks could endanger the safety, access and dignity of communities.

The CLDRM+ guide aims to expand the capacity of local civil society partners and government actors. This will improve the sector's knowledge and the strategies used in DRRM systems and programs. The four main goals of this guide are to:

- Improve the knowledge and skills of people who facilitate CLDRM+ sessions
- Improve people's understanding of how a CLDRM+ planning process can be sensitive to protection risks
- Improve the facilitation of CLDRM+ planning processes so that they are more sensitive to protection risks
- Improve people's skills to create learning spaces where they can reflect on disaster responses that are community-centered in a safe, collaborative and innovative environment

#### When to use

The CLDRM+ process should be used before an emergency or disaster as part of disaster preparation, planning and mitigation activities.

#### How to use

The CLDRM+ is designed to be a participatory and inclusive tool (see **who to involve** below). It can also be used in different ways, depending on staffing capacity and the availability of resources. The process can use virtual and/or face-to-face sessions.

#### Who to involve

Anyone who works at the community level in DRRM can participate in the CLDRM+ planning process. The participants must include representatives of groups who are vulnerable and traditionally marginalized. This may include women, older people, youth, children, speakers of marginalized languages, people with disabilities, particular ethnic groups, indigenous peoples, informal settlers and people who are displaced. Participants could include:

- DRRM planners
- DRRM coordinators
- Officers of homeowners' associations
- Community emergency responders
- Civil society actors
- Protection actors
- Representatives of women's groups
- Representatives of people with disabilities associations
- Members of community-based organizations who do disaster risk reduction (DRR) needs assessments at the community level

#### Key definitions

For other definitions please see the Glossary in Part 5 of the toolkit.

**Disaster risk:** The deaths, injuries, or damage that a system, society or community may experience over a particular time.

**Hazard:** Any event, situation or activity that can cause death, injury, property damage, disruption or environmental problems.

**Natural hazard:** A natural process or event that may kill or injure, damage property, destroy livelihoods, interrupt services and cause disruption or environmental damage.

**Protection risk:** The possibility of someone experiencing danger or harm—including through violence, coercion, discrimination or deliberate deprivation.

**Vulnerability:** A characteristic or circumstance that puts a person at higher risk of being harmed or hurt. Vulnerability is different for each person and situation.

#### **Facilitation notes**

#### **Preparation**

Planning is the first and most critical step in the process. If planned well, the CLDRM+ process will be safe, inclusive and accessible to all.

The following are key steps to take during the planning phase:

- Map out the different groups present in the community—including the most marginalized and vulnerable. Consider how they can be included in the CLDRM+ process. This helps to involve and engage people who may not be able to join the regular workshop group due to cultural and social norms. For example, workshop sessions can be conducted more than once, with separate sessions for people in the same age groups, or people with disabilities. Single women may not be able to join a general meeting but may be interviewed individually or in a women's-only group (interviews could follow a key informant interview [KII] approach). Where appropriate, trusted representatives of people with specific needs can be identified to participate—such as caregivers, advocates, teachers, etc.
- Talk with different groups about how safe it is for them to take part in the CLDRM+ sessions. Ask them how to make it safer for them—for example, by changing the location or time of the session.

- Collect information on protection risks. Use the Bubble Analysis Guide. An example is included in Tool 2.30
- Ask people from the community about what barriers might prevent certain people from taking part in the sessions. Make sure to ask them how to get rid of these barriers.

#### **EXAMPLES OF BARRIERS MAY INCLUDE:**



Logistical—
people may
not have
transport to
reach a
location, or it
may be hard
to reach
because of
bad roads



Financial—it
may cost too
much money for
people to travel
to the location,
or they may
have to miss a
day of work to
participate



Security—the roads may be unsafe, or there may be non-state armed groups in the area



**Physical**—some people may have mobility issues



Linguistic—the language people speak may not be used to announce the workshop or to run the sessions



Psychological/
cultural—certain
groups may not be
allowed to leave
the house alone or
be seen in public;
people taking care
of children may
not be able to
leave them at
home or bring
them to the
workshop

- Use this information about barriers to adapt the CLDRM+ content and process to make it possible for all people to participate. For example, interpreters and translators can be hired to make the content and sessions accessible to more people. Resources can be shared in large print for people who cannot see well.
- Make sure the sessions are easy to understand for many kinds of people. Some people may need extra support to understand the sessions, especially during group work. After each session, check that everyone understood the content. Make sure they feel welcome to ask questions or share concerns.
- Make sure key words used in DRRM and Protection are translated into local languages.
- If using interpreters, meet with them before the sessions. Explain the topics of the sessions. Review the topics or words that may be sensitive for a particular group of people. Give them the technical words that will be used, and their official translations before the session so they have time to prepare.
- Let people know about the sessions using different ways and in all the local languages.
- Make sure people can give feedback and make complaints. They must be able to do this in an easy, safe and confidential way. People may want to share concerns or feedback about the CLDRM+ process and the behavior of staff.
- Talk to protection actors working in the area. Invite them to take part in the sessions, along with other relevant actors (as per the list above).
- There should be someone at every session who is trained in psychosocial first aid. This is important because people may share very upsetting stories in the sessions. For example, someone may share that they or someone they know is a victim of sexual and gender-based violence (SGBV). People may also share upsetting information about protection or safeguarding concerns.
- Review the Referral Pathway Card for the area with the team. This has information for people who need basic support and services for health, SGBV, child protection, mental health, psychosocial services, etc. It also tells people about the basics of orienting people to services included on the Referral Pathway Card. The team needs this information so they can:
  - Orient people towards support (if people share protection or safeguarding concerns during the session).
  - Give correct information on the services and support available. People often ask specific questions about the support available during the historical events and mapping sessions.

<sup>30</sup> Guide to Bubble Analysis: https://efom.crs.org/wp-content/uploads/2019/05/CRS-Protection-Risk-Analsyis-Guide- May-2019.pdf.

- If working in an area where there are no services for people who have protection and safeguarding needs
  (that is, where there is no referral pathway), work with protection actors to develop a basic referral pathway
  card.
- All staff should have orientation before hosting CLDRM+ sessions. This should include information about how to:
  - Respond safely to someone who says they have been harmed, abused or exploited
  - Use a survivor-centered approach
  - Orient people to the support and services they need
  - Tell people how to report safeguarding and protection concerns and give feedback<sup>31</sup>
- Make sure that each session has one person for each of these three roles: facilitator, note-taker and psychological first aid (where needed).
- If possible, choose a location with internet access. If people have internet access, they can immediately look up any information during the sessions.



How the sessions are delivered depends on many factors. These factors include how many staff can assist, COVID-19 (and other infectious diseases) alert levels and restrictions, and the resources available. It is possible to do the workshop in a "hybrid" format—for example, with some sessions done online and some in face-to-face sessions.

 $<sup>^{</sup>m 31}$  Developing a Referral Pathway for Essential Protection Services.

#### **Overview of the Sessions**

The CLDRM+ processes involve the following sessions.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

SESSION	PURPOSE	OUTPUT	TIME
1: Social Memory of Events	To create a shared understanding of how the community has changed and continues to change	Disaster timeline	2 hours
	To jointly agree on the frequency of disasters and other stresses		
2: Mapping of Disaster Responders and Communication Preferences	To identify and map the individuals, institutions and organizations that contribute to the effective disaster risk management	Conceptual map	2–3 hours
references	To understand the communication preferences of diverse groups in the community, both in terms of giving and receiving information		
3: Community Hazard Mapping	To assess which areas in the community are at risk of hazards and locations where people are safe	Community hazard and protection risk map	2–3 hours
3.1: Community Hazard Mapping— Transect Walk	To finalize the community hazard and protection risk mapping by visiting the areas and making final changes to the map	Updated community hazard and protection risk map	2–3 hours
4: Vulnerability Mapping	To identify the needs, barriers to services and support and risks face by vulnerable groups	Vulnerable Groups Map	1–2 hours
4.1: Risk Mapping with Children and Young People	To identify the risks and protection factors that exist in the community	Risk Mapping (with children)	45–60 minutes
4.2: Key Informant Interviews	To identify the specific needs, barriers and risks of the most vulnerable people and groups	Interview answers	45–60 minutes
4.3: Vulnerable Group Mapping	To increase awareness of the experience of vulnerable people and groups		
5: Community Risk Assessment	To list and describe current and potential risks in the community and how they can affect the safety and welfare of the community	Risk assessment report	1 hour and 30 minutes
6: Problem Tree Analysis	To identify and describe problems which contribute to the risk of disasters	Problem Tree	2 hours
7: Community- Centered Solutions	Through a participatory approach, collectively agree on solutions that will prevent, reduce or overcome the impacts of the risks identified. These solutions can then be used as tools or models that can be included in the Disaster Management Plan	Brainstorm of solutions	2 hours
8: Developing the Disaster Risk Reduction Plan	Community Disaster Risk Reduction and Management Plan	DRRM plan	1 hour

#### **Session 1: Social Memory of Events**

Objectives:	<ul> <li>To create a shared understanding of how the community has changed and continues to change following disasters and other stressful events</li> </ul>	,	
Output:	Output:  • Disaster Timeline		
Time:	<ul> <li>Suggested time 2 hours (this is flexible and depends on the audience)</li> </ul>		
Tool Used:			
Materials Needed:	<ul><li>Flipchart Paper</li><li>Markers</li><li>Multicolored paper, cut into small and large circles</li></ul>	Scissors     Tape	

#### **Activity Preparation/Facilitator's Notes**

- Make sure that some of the participants have knowledge and experience of the disasters and other crises in the community in the past 5–20 years. This is because this activity is primarily based on the participants' collective memory of past events.
- Identify key past disaster events in the community. This can be done through a desk review or key informant interviews (KIIs).



Sometimes participants will not remember the key disasters or crises or will have forgotten the details. Be ready to add in extra information from the desk review and KIIs.

- Translate key disaster and protection words into the local languages.
- This session may bring up painful memories and strong emotions for some people. Make sure that there is someone trained in psychosocial first aid in the session. This will allow people to receive immediate support.
- Make sure the person taking notes writes down details. Use the note-taking template if needed.

#### **Process**

#### 1. Start the session by welcoming all the participants

- Begin by introducing the team. Say each person's name and their organization. Explain the goal of CLDRM+ in simple and brief terms.
- Explain that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.
- Everyone has an important job today. They are here to speak for all the other people in their community who
  are not present. It is important that they imagine what it was like for those people during past disaster events.
   This means their ideas and opinions and questions mean a lot. Thank them in advance for doing this good and
  important work.
- Explain that today's session may cause painful memories for some people. These memories can cause strong
  emotions and distress. Tell them they are free to step out of the session and leave the room if needed. If at
  any time they want support or are not feeling well, they should tell one of the staff members.<sup>32</sup>

#### 2. Explain the objectives of the session

- Explain that the goal of this session is to remember the important events that have negatively affected their community/village. For this session, "events" mean any disaster events—such as floods, droughts, storms and other crises (including mass demolition of informal settlements, violent conflict, people being displaced).
- Explain that these events will be "revisited" to share experiences and details. By the end of this session, a timeline for the community will be developed, based on their collective memories of important events.
- Explain that sharing experiences and making this timeline should help the community be better prepared for the negative impact of future events.

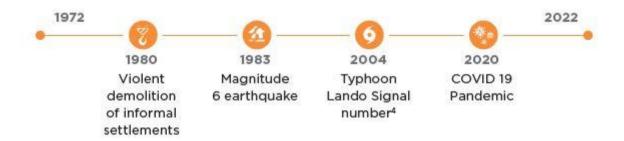
<sup>&</sup>lt;sup>32</sup> As stated in the directions on how to prepare, at least one staff member leading this session must be able to provide support to people who get distressed. When possible, staff can refer people to local psychosocial support and services.

- Remind them to stay focused on their community. They should not focus on events that happened at the country or regional level that did not affect them.
- Make sure that participants understand key words and concepts—such as "hazard" and "vulnerability"—before doing the activity.

#### 3. Create the Social Memory of Events Timeline

- Show the participants a flipchart with a horizontal line across the middle.
- Draw a point on the line and explain that the point marks the current year.
- Ask the participants to think about the most important events in the community in the past 5–20 years or as far back as they can remember. Important historic events include:
- Disasters from natural hazards—such as floods, cyclones, earthquakes or tsunamis
- Other crises—such as violent conflict, the internal displacement or large numbers of people, or rapid spread
  of infectious diseases

#### Sample Illustration<sup>33</sup>



#### 4. Explore the timeline

- Ask a person or group to present the timeline to everyone
- Use these questions to guide a conversation about each event on the timeline:
  - How did the event affect the community?
  - Were there any groups in the community that were particularly affected? Which ones? How was the impact of the disaster different for them? What specific needs did they have?
  - What protection issues came about because of the event? For example, did it lead to increased crime, violence, depression, and anxiety or sexual and gender-based violence (SGBV)?
  - How did the community cope with the negative effects?
  - What kind of help did the community have to cope with the disaster? (This is also called a "response")
  - Was there anything missing from that help?
  - Were there any lessons about how help could be better next time?
- Check with the group to make sure they are satisfied with the timeline. If they have no more to add, share any information from the desk review/KIIs that is not already on the timeline. Use the guiding questions above to facilitate a similar discussion. Add them to the timeline.

#### 5. Imagine a future timeline

- Ask the participants if they can see any aspect of these events or timeline that repeat themselves.
- Can any events be predicted which may happen in the future? Either the same events or similar events? For
  example, the timeline shows many droughts or floods. If the group has predictions, add these to the future
  timeline.

#### 6. Review key points and close the session

- Review the key points from the sessions.
- Thank the participants for taking part in the discussions.
- Explain the next steps.

<sup>33</sup> Adjust the time frame of "historic" depending on the group. Another thing to consider is when the community is settled in the current location.

### Social Memory of Events note-taking template

YEAR	DISASTER/EVENT	IMPACT (by major group affected)	MAJOR ACTIONS TAKEN	LESSONS LEARNED

## **Session 2: Mapping of Disaster Responders and Communication Preferences**

Objective:	<ul> <li>To identify and map the individuals, institutions and organizations that do DRRM at the community level</li> </ul>	<ul> <li>To understand how different groups prefer to get information and share information (their communication preferences)</li> </ul>
Output:	Conceptual Map	
<b>Duration:</b>	• Suggested time 2–3 hours (this is flexible and	d depends on your audience)
Tool Used:	• Communication Preferences Survey <sup>34</sup>	Disaster Responders Mapping
Materials Needed:	<ul><li>White Flipchart Paper</li><li>Markers</li><li>Multicolored paper, cut into small and large circles</li></ul>	Scissors     Tape

## **Activity Preparation/Facilitator's Notes**

- Identify disaster responders and protection actors who work at the community and regional level.
- Make a list of the support and services each actor provides. Use the list during the session as a reference tool. If needed, use this mapping and referral guide: Developing a Referral Pathway for Essential Protection Services.<sup>35</sup>

#### **Process**

#### 1. Start the session by welcoming all the participants

- Start the session by welcoming all the participants. Explain that this session is the next step in the CLDRM+ process. Ask the participants if they have any questions about the process up to this point.
- Remind everyone that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.

#### 2. Explain the objectives of the session

- Explain that the goals of this session are:
  - To identify the key individuals, institutions and organizations that do DRRM at the community level. This
    means that they do planning and response in the case of disaster event. Some of these people are also
    called disaster preparedness and response actors.
  - To identify the communication preferences of different groups of people. Communication preferences
    means how people prefer to get information and share information. It is especially important to
    understand these communication preferences so that information can be shared with as many people, and
    as quickly as possible during an emergency.
- Explain that two products will be created during this session:
  - <sup>a</sup> A conceptual map, which shows the relationship and links between disaster responders and the community
  - $\ ^{\square}$  A list of communication preferences from different groups of people

#### 3. Complete the Responders Mapping Exercise

## PART 1: Identify actors in the community working in disaster preparedness and response

- Explain that the reason why these people and groups need to be identified is to make sure all the relevant stakeholders are included in the CLDRM+ process. It is also important to understand which institutions help respond to a disaster event along with their responsibilities.
- Restate important points from the Social Memory of Events session. For example, show the timeline and share key reflections. Remind people of:

<sup>&</sup>lt;sup>34</sup> It is important to do the communication preferences session with different groups separately. For example, this may mean a session with people who share the same language, age group, gender, etc. Make sure the communication preferences of different groups are included in the final communication plan.

<sup>35</sup> Developing a Referral Pathway for Essential Protection Services.

- The issues which came out after a disaster
- How the community responded
- Some of the key lessons learned
- Draw a large circle on flipchart paper. Explain that the circle is the community. Then draw a vertical line in the middle to divide it into two sections. Explain that the left half is the community before the disaster event ("pre-disaster"). The right half is the community after the disaster event ("post-disaster"). The time during the disaster fits into the "post-disaster" half.
- Remind participants that this is a conceptual map and not a physical one. The point is to visually identify the
  actors who prepare and respond to a disaster event or crisis. It also shows which actors work inside and
  outside of the community.

#### **Disaster Responders Map Example**



- Ask participants to think about who make up the individuals, institutions and organizations that contribute to disaster risk reduction and management at the community level. That is, which actors plan for and/or respond around disaster events? Make a list.
- Then ask them to use a symbol or drawing to show each actor on the map. Explain that they can use smaller/bigger symbols to show the presence (level of influence) of each actor. For example, if most participants are very familiar with a specific actor, they would be seen as having a higher level of influence compared to those with whom the participants are not as familiar.
- Discuss the role and responsibility of each of the identified individuals/institutions. Use the questions below to guide the conversation and exercise. Continue to draw links as the conversation evolves.
  - What kind of services do they provide? What are their priorities?
  - What kind of protection do they offer to the community? Which groups do they serve?
  - How good are the services they provide?
  - Do any of these organizations use new approaches or tools to reduce risks related to disaster events or other crises?
- Tell participants that the next step is to put the symbols or drawings in the circle. Explain that if the actor only has a role and responsibility before a disaster, put them in the "pre-disaster" half; if the actor only has a role and responsibility after a disaster starts, put them in the "post-disaster" half. If the actor belongs in both halves, put that symbol or drawing on the line in the middle.

- Ask participants to think about the social and protection issues that may come up after a disaster happens.
   Read out the list of issues the group made. Ask the group if there are any actors who help deal with these social and protection issues that should be included. Are there any actors who help groups with specific needs before, during or after a disaster? Share the examples of actors who help people with disabilities, survivors of SGBV or children and youth.<sup>36</sup>
- Ask the group about the relationships and links between the actors. For the first few responses, have a cofacilitator draw or give them ideas on how to draw this. For example, they can use overlapping circles or similar colors if the actors work together or have similar functions.
- Check with the group to make sure they are satisfied with the map. If they have no more to add, share any information from the desk review/KIIs that is not already on the map. Share information about any actors who are not on the map (make sure they understand what kind of support and services these actors provide). Discuss what kind of actors they are. Use the guiding questions above. Add them to the map.
- Ask the group if there are any support or services people need that no actor provides. That is, is there a gap between needs and services? Are there groups who are not protected in case of a disaster? Are there areas not covered in case of a disaster?

#### PART 2: Identify actors outside of the community working in disaster preparedness and response

- Repeat the same process above, except this time focus on actors outside of the community. These actors may also contribute in the CLDRM+ planning process.
- Photograph or document the materials from the session. The timeline, a list of actors and concept maps can be shared with local planners in DRRM, so insights or feedback can be considered.

#### 4. Communication Preferences Mapping Exercise

- Explain that the next part focuses on identifying the communication preferences of different groups.
- Communication preferences means how people prefer to get information and share information. Special attention must be paid to whether there are any groups who face challenges in accessing or sharing information. It is important to understand these communication preferences for two main reasons: 1) so that information can be shared with as many people, and as quickly as possible, during an emergency; and 2) so that people have different ways of sharing information with actors. People need the ability to make complaints, ask questions and give feedback.

#### PART 1: Preferred way to receive information

- The first part will look at the ways in which people prefer to receive information.
- Draw the table below on the flipchart. Make sure to include the symbols and text. This will help more people understand—especially those who cannot read or cannot understand the language being used. Put the drawing in a place where everyone can see it.

<sup>&</sup>lt;sup>36</sup> Key Protection Service Providers includes security forces (e.g. police) and people who provide services for health, SGBV, child protection, mental health, psychosocial support and legal support.

## **Information-Sharing Channels**

Leaflets	Television	Radio	Newspapers / Magazines
	Ä	⊜ :	
Loudspeaker	Social media	Mobile (calls)	Mobile (SMS)
TO.			<u>@</u>
Mobile (WhatsApp/ Telegram/Viber	Internet	Religious leaders	Government
groups)			
Friends and family	Health professionals	Music	Posters / Billboards
Community leaders	Theatre	Door to door	
	*:	1	

- Explain that the table shows different channels of communication which disaster responders use to get
  information to the community. Some are in written form (such as newspapers), some are verbal (such as word
  of mouth or meetings held by community leaders) and some are more modern (such as social media and
  internet). Ask the group:
  - How does the community receive information now? What channels are available? For example, do people
    use telephones, radio or community meetings? Is there a channel not included in the table? Add it to the
    flipchart.
  - How does the community prefer to receive information? Written or verbally?
  - Are there groups in the community with different preferences (both in terms of method and channel)?
     Explain that different groups may be groups that share things in common—for example age, gender, religion, people with disabilities, etc.
  - How much does the community or different groups trust these channels? Can everyone use them?
- Give everyone a marker. Explain that they should vote for their top three preferences. They can do this by making a mark next to a preference.



This process can be repeated using the same flipchart but with another group. Give the other group marker pens in a different color.

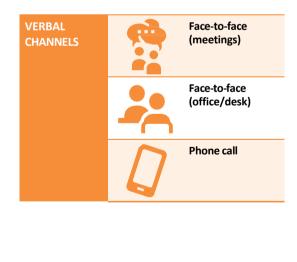
- After everyone has voted for their three preferred options, use the questions below to guide a conversation. Explain that this conversation is about communication preferences based on past disasters.
  - During past disaster events, what were the most trusted channels of communication? Did they change as compared to the ones now marked?
  - What channels are most likely to keep functioning during and after a disaster event or other crises?
  - Are there groups in the community who could not easily find or understand information during the last crisis? What factors made it difficult?
  - How can these factors or barriers be changed?

## PART 2: Ways to give feedback, ask questions and report complaints

- The next part will look at the ways in which people prefer to give information. This conversation is about the best way to give feedback, ask questions and make complaints.
- Draw the table below. Make sure to include the symbols and text. This will help more people understand, including if any of the participants cannot read or cannot understand the language being used. Put the drawing in a place where everyone can see it.

## **Feedback and Complaints Channels**





- Explain that the table shows different channels of communication which disaster responders commonly use to help community members communicate with them. Ask the participants to share the best ways (or "channels") for community members to give information to disaster responders. For example, how would people give feedback, ask questions and make complaints?
- Give everyone a marker. Ask them to vote for their top three preferred options. They can also add any missing channels.



This process can be repeated using the same flipchart but with another group. Give the other group marker pens in a different color. Sometimes, people prefer different channels for different types of information or in different circumstances. Capture this in the meeting notes.

After everyone marks their preferences, use these questions to guide a conversation. Make sure to consider groups with specific needs—such as women, men, older people, people with disabilities, children, minority groups, etc.

- Would everyone in the community be able to use these channels? Would it be safe for everyone to use them?
- Are there groups in the community that find it difficult to give their feedback, ask questions and make complaints? Which groups? What makes it hard?
- How would they prefer to give feedback or make a complaint to a disaster responder about the behavior of their staff or if they notice any form of abuse of power (fraud, exploitation, etc.)? Would they prefer spoken or written ways? Why?
- Which language or languages would they prefer to communicate with aid agencies or other disaster responders?



Make sure that comments are recorded on the note-taking template.

#### 5. Review key points and close the session

- Review the key points from the sessions.
- Make sure to review the concept map.
- Comment on the important information and learning that came out of the exercises.
- Thank the participants for taking part in the discussions.
- Give the participants questions to think about after the session—for example, are there other needs that people have before, during or after disasters or other crises that were not discussed? Are there actors there to fill those needs with support and services?

Disaster Responders Mapping Exercise note-taking template

Disaster Responders Mapping Exercise note-taking template						
NAME OF INSTITUTION	ROLE (medical, protection, logistics, transport, rescue, evacuation, recovery, preparedness)	LINKS TO OTHER INSTITUTIONS	AREA COVERED/GROUPS SERVING	LOCATION (inside or outside of community)		
Example: Barangay VAWC (Violence against Women and Children) Desk Officer	Protection	Barangay Health Center, Barangay Police, Public Attorney's Office, Municipal Social Welfare and Development Office	Barangay 34 Caloocan/ Women and Children (minors and adults)	Inside the community		

## **Communication Preferences Mapping Exercise note-taking template**

GROUP TO CONSIDER (add relevant groups for your context)	COMMUNICATION BARRIERS	PREFERRED CHANNELS TO GET INFORMATION	PREFERRED CHANNELS TO SHARE INFORMATION (give feedback and make complaints)
Women			
Men			
Children			
Adolescent girls			
Adolescent boys			
Older people			
People with disabilities (specify which ones)			
Speakers of marginalized languages			
Minority groups (please specify)			

## **Session 3: Community Hazard Mapping**

Objective:	<ul> <li>To know in which locations in the community people are at risk of hazards (risk zones)</li> <li>To know in which locations people are safe, or have access to protection measures (areas of low risk)</li> </ul>	To know how protection measures decrease the "multidimensional" risks of disaster events or other crises
Output:	Community Hazard and Protection Risk Map	
<b>Duration:</b>	• 2–3 hours (this is flexible and depends on your audio	ence)
Tool Used:	Community Hazard Mapping	
Materials Needed:	<ul> <li>Base map of the community using satellite imagery from Google Earth or other (if available). Base maps usually give location references for features that do not change—such as boundaries, rivers, lakes and major roads. If a base map is not available, use a large sheet of white paper for participants to add features by hand.</li> <li>Markers (multiple colors)</li> </ul>	<ul> <li>Transparency paper, used to overlay on the base map. It is best to have up to six: one each for different types of features participants will add to the map</li> <li>Multicolored paper, cut into small pieces</li> <li>Scissors</li> <li>Tape and/or glue</li> </ul>

#### **Activity Preparation/Facilitator's Notes**

- To prepare for this session it may be useful to do the "Transect Walk" (see explanation below). A Transect Walk helps introduce the group to the session and exercises.
- Prepare base maps of the community:
  - Collect satellite images from Google Maps, Open Street Map (OSM) or United States Geological Survey (USGS) Open-Source Satellite Images. If these are not available, the map will need to be hand-drawn.
  - Print them onto A0 size tarpaulins (33.1 x 46.8 inches or 84.1 x 118.9 cms).
  - Make sure that all locations of the community are on the printed map.
  - Make sure that the map matches the boundaries set by the local and/or the national government agency data.



It is a good idea to ask different community members if the boundaries on the map are correct.

#### **Process**

#### 1. Start the session by welcoming all the participants

- Explain that this session is the next step in the CLDRM+ process. Ask the participants if they have any questions about the process up to this point.
- Remind everyone that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.

#### 2. Explain the objectives of the session

- The aim of this session is to create a map describing the areas at risk of natural hazards. It should help people understand:
  - In which locations people are exposed to hazards (risk zones)
  - In which locations people are safe or have access to protection measures; the participants will plot different resources in the community that help protect people and decrease the negative impacts of disasters or other crises (areas of low risk)
  - How these protection measures decrease the "multi-dimensional" risks of disaster events (multi-dimensional means that a risk affects more than one part of people's lives)
- Explain that they will use this information to create a map detailing the location of hazards and associated risks throughout the community.

• Remind them of the other tools created (the timeline, the concept map and communication preferences). Tell them that this session will build on these ideas.

#### 3. Proceed with the Community Hazards Mapping Exercise

- There are two ways of doing this exercise:
  - Option 1), use a satellite base map image of the community.
  - Option 2), ask participants to draw a map based on their collective memory.
- Explain the key concepts on mapping and adding features of the community to the map. Place a pin or make a center point on the map/paper. This will make it easier for participants to place the transparent layers/plastic sheets together.
- Explain to participants that they will make a map legend. A legend is a description of the types of features included in a map, usually displayed in the map layout. Legends often use graphics of symbols or examples of features from the map with a written description of what each symbol or graphic represents. The participants will identify the location, and then trace or draw features on each layer of plastic that will go on top of the base map.
- Each of the transparency layers represents different features:
  - Layer 1: Natural landscape features. These include water bodies, high and low ground, forest areas, etc.
  - Layer 2: Built environment. These include roads, houses, bridges, floodways, evacuation centers, canals, wells, etc.
  - Layer 3: Land use. These include areas used for farming, fishing, mining, etc.
  - Layer 4: Other community resources and facilities. These include health services, schools, police, places of worship, markets, etc.
  - Layer 5: Vulnerable groups. These may include areas where marginalized or vulnerable people live—including those from different ethnic or religious groups, or where a different language is spoken.
  - Layer 6: Hazards (refer to the list below).
- To start adding features, lead the group by finding the place on the map where the workshop is being held. Next ask them to add more features to the map.

#### **RISK ZONES**

- The next stage is to identify "risk zones." Define "risk zones" to the group as an area of high risk.
- If other risk maps are available, show them to the group. Ask if things are correct or incorrect on the risk map.
- Lead the group in identifying risk zones. Ask if there are there are geo-hazard risk maps for the area. If so, show these maps to the group. Describe each natural hazard type, risk level (low, medium, high) and other important details. Ask if these risks should be added to the new map.
- Use the following questions to identify, describe and classify risk zones. It may be useful to use a color system in the legend (low risk = green, medium risk = yellow, high risk = red).
  - What kinds of natural hazards impact the community? (e.g., earthquakes, ground fracture, liquefaction, landslide, tsunami) impact the community? Depending on the hazard type, identify high-risk areas within the zone.
  - What specific impacts or disaster aftershocks (or secondary hazards)—such as fire, flooding and building collapse—could occur and where?
  - Who and what is most likely to be affected by hazards and associated risks?
  - How many people need to evacuate if certain hazards occur? Where would they evacuate from? Where would they go?
  - What livelihoods practices take place in the area? Are any of them more vulnerable than others—for example, are any more likely to be affected by a hazard? Where are they?
  - Are any public places in high-risk areas—for example, evacuation centers, health clinics, schools, public prisons?
  - Are there any areas where some people are at more risk NOW than before disasters—for example, during
    or after a disaster, people living in a certain area may be more at risk of crime, violence, harassment and
    SGBV? What other risks are missing from the map?



Make sure that the group talks about the risks for women and girls.

#### **AREAS OF LOW RISK**

The next stage is to identify areas of low risk. These are areas with a lower risk because of the presence of protection-related conditions. Tell the participants to identify the areas of low risk, or actors who give support or assistance to the community when a disaster happens. Explain that each of these areas needs to be clearly shown on the map (including the physical area it covers and its characteristics). It may be useful to use a color system in the legend. Use the map the group made in <a href="Session 2: Mapping of Disaster Responders">Session 2: Mapping of Disaster Responders</a>. Use the following questions to identify, describe and classify the areas of low risk:

- Where are the public places that offer support to the community in times of disaster—for example, evacuation centers, convenient stores, town halls, health centers, banks, etc.?
- Are there any help desks or helpline assistance in the community? Where are they located?
- Where are ATMs located/or other sources of money or funds?
- Are there any services to support survivors of violence—including SGBV? Health Services? Psychosocial support? Child protection? Child reunification? Are these services in-person or on the phone?
- Are there are any informal services or facilities that give support? ("informal" means not by the government or any other official agency or organization)
- Are there any humanitarian centers or relief centers? Where are they?
- Are there any houses or locations in the community where people who are disaster victims or displaced can stay?
- Are there other areas of protection not yet identified?



Build on the information already collected as part of the Responders Mapping Exercise.

#### 4. Presentation of results and sharing of insights and recommendations

- In one big group, ask participants to present the map they made and explain their answers.
- Highlight any overlaps or differences between groups as they present their maps.

#### 5. Review key points and close the session

- Review the key points from the sessions.
- Make sure to review the map and the details.
- Comment on the important information and learning that came out of the exercises.
- Thank the participants for taking part in the discussions.
- Ask the participants questions to think about after the session—for example, are there other needs that people have before, during or after disasters that were not discussed?

## Community Hazard Mapping Exercise note-taking template

			note-taking t			
			TYPE OF ASSETS		CURRENT	TRANSPORT
THREAT		LOCATION	AFFECTED	EVACUATION	EVACUATION	USED (if
	(high, medium,			SITE (if relevant)	ROUTES (if	relevant)
	low)				relevant)	

## Session 3.1: Community Hazard Mapping—Transect Walks

Objective:	<ul> <li>To finalize the Community Hazard Mapping by visiting the areas and observing anything that needs to be added or changed in the map</li> </ul>
Output:	Finalized Community Hazard and Protection Risk Map
<b>Duration:</b>	• 2–3 hours (this is flexible and depends on the participants and the area being visited)
Tool Used:	Community Hazard Mapping
Materials Needed:	<ul><li>Note pads and pens</li><li>If available and if safe to use—cameras, GPS coordinates</li></ul>

#### **Activity Preparation/Facilitator's Notes**

- Ask participants to join in a "transect walk." This means walking through the community with the maps they have made. Explain that the purpose is to bring life to their hazard and protection map. They can see if they have missed anything and if they want to change, add or remove some information from the maps.
- If they agree, ask what areas or zones are at high risk of disasters and hazards. Which ones would they like to take a closer look at and see if there is information they can add, change or remove?

#### **Process**

#### 1. Do a transect walk in a large group

• In one big group, do the first part of a transect walk. Explain that in this first part of the walk, they will focus on the physical environment. For example, did they draw the borders of the areas or zones correctly? Did they describe the area or zone correctly? Were the details of the groups of people who live there correct?

#### 2. Do a transect walk in small groups

- Explain that in Part 2, they will split into small groups. This way groups can visit several areas or zones at the same time. Suggest that at least one person in the group should know the area or zone they want to visit.
- Start the transect walks in small groups.
- After the walk, they can add, change, or remove information from the hazard risk and protection maps.



During all of the transect walks, suggest that people take photos and use GPS coordinates—do this with caution. Use some of the guiding questions from the two mapping exercises to get people thinking more about hazard risks and protection.

#### 3. Transect walks with children

This tool can be used to complement the Risk Mapping tools for children and young people under the section on Tools for Children and Young People. It is useful to adapt the transect walks to make them more child-friendly.

- Ask the children to first create a "base community map."
- Look at the map together. Ask the children which areas or zones are good to visit. Which paths do they take to get there?
- Make sure to keep children safe on the walks. Before the walk, find out which places are unsafe. Where are there hazards or risks? Make sure enough adults join the group to help keep the children safe.
- Before planning the session, make sure to do a risk assessment of the area. The assessment should focus on child protection risks.
- Make sure children take pens and paper with them on the walk.
- When starting the walk, ask the children to:
  - Look out for "areas that could be dangerous to them" (hazards or risks). Use red stickers to mark these hazards on their map.
  - Look out for places or people who help people be safe and healthy ("community resources"). Use green stickers to mark places or people that help people be safe and healthy on their map.

## **Session 4: Vulnerability Mapping**

- The best way to identify the needs, barriers to services and support, and risks faced by people and groups who are more vulnerable than others, is to ask these groups directly.
- Do the next sessions (4.1, 4.2 and 4.3) with people and groups who are more vulnerable than others (also called "vulnerable people and groups").
- To identify them, ask the original group of participants in previous sessions for their ideas. Ask those participants for help in getting in touch with vulnerable people. Ask them to help find people who can represent vulnerable people and groups. Invite these people as representatives to take part in the CLDRM+ process.



These sessions can be held with people from only one vulnerable group at a time. This may help people feel more comfortable to share. For example, there can be sessions with only women, older people, people with disabilities, groups labelled as "minority" by the participants and young people. If sessions are held with only young people, different sessions could be hosted for boys and girls, or the group could be divided into smaller age groups. These representatives of vulnerable people and groups can be engaged in different ways. For example, the questions from the sessions could be used to do key informant interviews (KIIs).

## Session 4.1: Risk Mapping with Children and Young People<sup>37</sup>

	11 3
Objective:	<ul> <li>To have children and youth identify the risks in their communities</li> <li>To have children and youth identify "protection factors" in their communities</li> <li>To have children and youth decide which risks they would like to change</li> </ul>
Output:	List of protection risks and hazards as perceived by children and young people
Duration:	• 45–60 minute session (this is flexible and depends on your audience)
Tool Used:	Risk Mapping (with children)
Materials Needed:	<ul> <li>A large sheet of white paper for participants to draw a map of the community; alternatively, you could use the image of a map already drawn</li> <li>Markers (multiple colors)</li> <li>Multicolored paper, cut into small pieces</li> <li>Scissors</li> <li>Tape and/or glue</li> </ul>

#### **Activity Preparation/Facilitator's Notes**

- Make sure that all staff working with children and youth have been trained in safeguarding and/or have clearance to work with children and youth.
- Make sure to write down children's ideas and opinions (give just as much value and detail to their voice as for adults). After the session, transfer the information into the *Vulnerable Groups note-taking template* available below.
- During the session, the child and young people will do a risk mapping. When these maps are analyzed, it is important to look for any differences between the groups based on their:
  - Gender
  - Age
  - Ethnicity
  - Disability or vulnerability
  - Geographic location or background (where they come from or are living)
  - Socio-economic background
  - Socio-political context
  - "Status" for example are they refugees, returned refugees, internally displaced, etc.

<sup>&</sup>lt;sup>37</sup> The Body Map and the Risk Mapping tools for children and young people are adapted from Save the Children: A Kit of Tools for Participatory Research and Evaluation with Children, Young People and Adults; Available at: https:// resourcecentre.savethechildren.net/pdf/kit-of-tools\_1.pdf/.

- Sessions can be organized for children and youth of different ages and genders. This may help children and youth feel more comfortable to share.
- It is useful to have two people take notes during this session. One person takes notes on the ideas and opinions that children and youth share during discussions. The other person takes notes specifically on the ideas and opinions that children and youth share about the risk map.
- If a child or youth shares information that could be a protection issue, make sure there is a trained adult who can follow up on this after the session.

#### **Process**

- Give the children or youth a large piece of paper and pens or pencils.
- Tell them they are going to work together to draw a map of their community/camp. They will need to mark all of the important places.
- Ask one participant to draw an outline map of their community on the large sheet of paper. Make sure to mark north at the top and have clear lines where the community or camp begins and ends.
- Ask them to fill in information. Use these questions to guide them:
  - Where are the important roads?
  - Where are the important buildings?
  - What other important places are there?
  - Where are the schools?
  - Where are the public buildings?
  - Where are the government buildings?
  - Are there other places that should be on the map—for example, rivers, mountains, beaches, crop fields, water facilities, etc.?
  - Are there places they go to often or at special times of the year that are outside the community?
- Explain that they should now mark the places on the map that make them feel safe or happy. Where do they like to go? In which places do they feel safe? Where can they go to get help?



They can put happy faces or special color marks next to places already on the map.

- Let the children and youth give their input and facilitate any conversations they start.
- Ask if there are any places missing that they forgot to put on their first map. If so, have them do this now.
- Explain that they will now mark the places on the map where they do NOT like to go. Are there places where it is dangerous for them to go? Where are they scared to go? Are there places where children and youth get hurt or could get hurt? Are there places where they are not allowed to go because adults think it is not safe for them?



They can put unhappy faces or special color marks next to places already on the map.

- Let children and youth give their input and facilitate any conversations they start.
- Ask if there are any places missing that they forgot to put on their first map. If so, have them do this now.
- Explain that they will now mark on the map three "risk areas" they wish would change. A risk area is where children and youth (or anyone) get hurt or could get hurt—for example, a neighborhood which is known to be particularly dangerous.



They can put three stars or three special color marks next to places already on the map.

 Ask if there are any places missing that they want to change but they forgot to put on their first map. If so, have them do this now.

- Let children and youth give their input and facilitate any conversations they start.
- Once each participant has "voted" on the three risk areas to change, ask about their ideas on how to change these places to make them safe. Note where there are places which could never be made safer—for example, a river that always has a dangerous current and should never be used for swimming.
- Let children and youth give their input and facilitate the conversation. Make sure to ask if there are differences about how to make places safe or safer for boys or girls, young children or older children.
- Once the discussion has been finalized, choose a fun short exercise which allows the children to shake off any strong emotions.

## Session 4.2: Key Informant Interviews with Representatives of Vulnerable People and Groups

Objective:

• To identify specific needs, barriers and risks of the most vulnerable people and groups in the community

• A5-60 minute session (this is flexible and depends on your audience)

Materials

• List of questions, adapted to the persons being interviewed
• Translation of key terms

• NOTE: this activity is done when no representatives of these groups can be involved in the CLDRM+ process

• Appropriate space for the interview

The Key Information Interview (KII) approach is useful to use with people who are vulnerable in more than one way. For example, someone who is elderly (an age that may mean more health problems or risk of injury in emergencies) and has a disability, or a teenage girl who comes from a minority group, or a person who has multiple vulnerabilities and is at higher risk for being hurt or harmed or excluded from the community and from the available support and services. This is why it is important to include vulnerable groups in the CLDRM+ process.

#### **Activity Preparation/Facilitator's Notes**

- Think about which groups need to be interviewed. People and groups to include are older people, children and youth, households led by females or children, people with disabilities and people who are displaced.
- Before using this tool, think about key terms that need to be defined and translated. Key terms could be *risk*, *safety*, *dignity* and *meaningful access*. Make sure the key terms are translated into local languages. When possible, have local people confirm these are the correct translations and make sense in the local context. Also make sure the person being interviewed understands the key terms. Explain each key word before asking questions.
- Some people who are interviewed may have strong emotional reactions to some of the questions. Think about which questions are asked and how they are asked. Make sure there is someone trained to respond to people in case they get upset.
- Use the "Dos and Don'ts" table on the next page when planning and doing interviews and focus groups.
- Before beginning interviews or focus groups, learn the safeguarding protocols of the organization. For example, how should safeguarding concerns be reported? How should disclosures of human rights abuses be managed?

#### PLANNING AND SETTING UP THE INTERVIEW

#### DO:

- √ Have the interview in a quiet, 
  √ Review key terms and their private space. The person being interviewed may feel uncomfortable if other people can hear or see them.
  - definitions before asking the questions. This is especially important if working across multiple languages.
- ✓Be prepared to respond to any safety. protection or ethical concerns shared by the person being interviewed. Follow the organization's safeguarding and protection protocol and guidelines. Ask a protection specialist for help if it is unclear how best to respond.

#### STARTING THE INTERVIEW

#### DO

Begin the interview or focus group with these steps:

- ✓Introduce the team (include names, organization, positions)
- √Share the purpose of the interview. For example: "The main purpose of this interview is to identify the different needs, barriers and risks of the community in case of a disaster. We will use this information to make a "disaster risk reduction plan," which is a list of actions that can reduce the impact of disasters in your community. We will make the plan to address needs across different groups living in your community; therefore, we want it to be helpful for everybody. And since different people have different needs, we want to interview you and include your needs in the plan. (NOTE: you can share with the person or group of people what it is about them that makes you want their input, e.g., is it because of their age, ethnicity, etc.)

#### ✓Explain the process:

- Explain how the information will be used (for example, to create a plan).
- Be clear that there are no right or wrong answers.
- Make sure to explain that the ideas and opinions they share will not affect the support or services they get right now or in the future. They will not be "punished" for giving negative opinions. Although their ideas and opinions are welcome, it may not be possible to include them in the plan or change the support or services.
- Do not make false promises. That is, do not promise to change the plan or the support or services they get. Also do not promise to make changes to the risks in the community.
- ✓ Be clear that participation is voluntary. This means they do not have to answer any or all questions. They can stop the interview at any time. Explain how much time the interview will take. Make sure they still want to participate.

#### ✓ Explain confidentiality:

- Explain that everything they ask or say is "confidential." Confidential means private. It means that no one is allowed to tell other people outside of the interview what they said without consent. Explain that someone will write things down during the interview.
- Be clear that the only exception to confidentiality is if the participant shares information which can lead to harm to others or to themself. In those situations, the interviewer has to report this to their supervisor, and maybe others.
- If they would like to be linked up to further support, they can also give permission to the interviewer to share some of the information with service providers. This will only be done if the participant gives their express consent.
- Explain that responses are "anonymous." Anonymous means that names are not linked to the responses.
- Explain that they can share concerns at any time. They can share privately. If in a focus group, they can find a staff member after the sessions.
- √Review key terms. Make sure everyone understands the definitions. If working in multiple languages, make sure the group agrees to the translation of the key terms.

#### DOING THE INTERVIEW

#### DO:

- ✓Let the person talk freely. Try not to ✓Look for "non-verbal signs and interrupt them.
- ✓Listen carefully. Practice active listening.
- ✓Start with simple questions.
- behaviors" that show the person feels uncomfortable. Examples include: if they stand with arms crossed over their chest, a particular look in their eyes, they blush or turn pale or keep looking away. These may be a sign that the topic should be changed, or the interview should end early.
- √Be polite
- ✓Take notes

#### DON'T:

X Don't ask questions that may be dangerous or risky for a person to answer. Don't ask questions that may insult a person.

X Don't rush the interview. Don't tell the person to speak faster or say less. If time is running short, ask fewer questions.

X Don't make promises or create expectations about future support or services or changes to the community.

#### **KEY QUESTIONS TO ASK**

- Has their life been affected by a crisis in the community? (Mention some of the events identified in the social memory session). Could they explain?
- How has it affected them? (Physically, socially, financially, economically)
- Did the place where they live expose them to more risk during the crisis? Did they feel more at risk because of [insert vulnerable group they represent]? (For example, being targeted by criminals.)
- Were other people's lives affected in the same way?

- What were their main needs at the time? (For example, food, a place to live, healthcare or medicine, fleeing the area.)
- · Was there anyone or anywhere that could help? (For example, a safe space in the community, any organization helping out.)
- Did they get any help from organizations? Did other people? Did the help meet their needs? Was it easy or difficult to get? Did the kind of help they got match their needs? Fill in any specific group information. (For example, "did the kind of help match the needs of people with disabilities?")
- Did anything block them from getting help? (For example, the people giving support or services did not speak their language, they could not travel to the site of support of services, no one was offering the right support or services.) Fill in any specific group information. (For example, "was there anything blocking elderly people specifically from getting help?")
- How could the help (support and services) have been better? How could the help have been made safer? How could it be easier to find and

Next, ask questions about their "communication preferences." Explain that the questions are about how they like to get and give information, or "communication preferences."

- How did they like to get information How do they like to give information and before, during and after a disaster? (For example, SMS, radio, loudspeaker, social media, community leader, etc.)
  - ask questions? (For example, if they want to share ideas, make a complaint or report the bad behavior of a staff member.) Would they prefer to write this information down or say it to a person? Would they prefer a suggestion box, email, WhatsApp, phone call, face-toface, etc.?
- Have they ever been blocked from getting or giving information in a disaster or emergency? What kinds of problems did they have getting information from organizations? What kinds of problems did they have in sharing information with them?

ENDING THE INTERVIEW / FOLLOWING UP					
DO:					
√Always ask the person if there is anything else they want to share.	✓Always thank people for their time, ideas, opinions and questions.	√Report any safeguarding or protection concerns (or other sensitive feedback) that a person shares.			
DON'T:					
<b>X</b> Do not promise to make changes based on this feedback.	<b>X</b> Do not refer people to services unless they have given consent.				

## Session 4.3: Vulnerable Group Mapping

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Objective:	<ul> <li>To increase awareness and knowledge of the experience of more vulnerable people and groups and about the specific needs, risks and barriers they face.</li> </ul>
Output:	<ul> <li>List of vulnerable people and groups (to be complemented with the information from the other sessions under Session 4: Vulnerability Mapping)</li> </ul>
Duration:	• 1–2 hour session (this is flexible and depends on your audience)
Tool Used:	Vulnerable Groups Mapping
Materials Needed:	<ul> <li>White flipchart paper</li> <li>Markers</li> <li>Multicolored paper, cut into small and large circles</li> <li>Scissors</li> <li>Tape</li> </ul>

#### **Activity Preparation/Facilitator's Notes**

- Collect information and data on the characteristics of the population in the community. This may include information on age, disability, gender, income levels, migration background, religion, ethnicity, languages spoken and any other locally relevant characteristics. It is very important to get this kind of information on the most vulnerable people and groups.
- The information can be collected through 1) a desk review and/or 2) key informant interviews with significant stakeholders. These stakeholders may be representatives of the vulnerable groups or they may be representatives of organizations working to provide key services and support to the most vulnerable groups—for example, representatives of women's groups, groups for people with disabilities, etc.



Make sure to include the stakeholders that were identified in the previous sessions or by local authorities.

■ Collect information and data on the key needs, risks and barriers faced by the most vulnerable people or groups during disasters or other crises. This information can come from focus groups or key informant interviews with vulnerable people and groups (sessions 4.1 and 4.2). Invite some of the most vulnerable people and groups to meet and talk about their needs, risks and barriers.



Identify "representatives" of these people and groups and involve them in the entire CLDRM+ process.

#### **Process**

#### Start the session by welcoming all the participants

- Explain that this is a continuation of the CLDRM+ process.
- Explain that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.

#### Explain the objectives/purpose of the session

- To identify the most vulnerable people and groups in the community
- To identify how different people or groups are affected by hazards and protection risks in crises differently
- To raise participants' awareness and knowledge of these groups
- For each group, identify the specific needs, risks and barriers they face in crises
- By the end of the session, the group will create a list of vulnerable people and groups in the community. The
  list will include their specific needs, risks and barriers in emergencies. This will help make sure that during an
  emergency, everyone's needs, risks and barriers are considered when planning and providing support and
  services.

#### Create a list of vulnerable people or groups in the community

- Review basic concepts of vulnerability and factors which put people more at risk. Lead a short conversation about examples of vulnerability and factors that increase risk in the community (see <u>Tool 2</u> for reference).
- Share the key ideas, questions and opinions from the separate risk, protection and needs sessions with different vulnerable groups—including young people or people with disabilities. Use the information collected in the Vulnerable Groups note-taking template. Make sure to explain why people from certain groups are more vulnerable than other people. Explain why and how they face more risks and barriers. Remind the group that people can be more vulnerable than others based on where they live—for example, some people might live in an area where it floods more often.
- Lead a conversation about the key findings shared from other sessions. Use the following questions to guide the conversation (making sure that someone takes notes on the Vulnerable Groups note-taking template):
  - Is there anything surprising in this information? Is there anything missing?
  - Are there other people or groups that live here but are not included in the community? That is, are there "marginalized" people or groups? If so, why? What are their characteristics (for example, do they do different jobs; do they have a different religion, ethnicity, language, date of arrival to the community)? Are there any values or beliefs in the community or the group that keep these people or groups from belonging to the community?
  - Who are the most vulnerable people and groups during an emergency?
  - Who are the most vulnerable people and groups right after an emergency?
  - What kind of risks do these people face before the emergency? Do any of these risks increase after an emergency? How?
  - What are some of the problems these people face which increase their vulnerability during a disaster? What kind of things block them from getting help (for example, they do not understand the language being used by aid organizations; they are not able to move around easily, either due to physical problems or safety issues)?
  - Based on these vulnerabilities, needs, risks and barriers, how can these specific people or groups be supported?
  - How can these people or groups be included in the CLDRM+ process?
- Review the <u>Community Hazards and Protection Risks Map (Session 3)</u>. Ask if any of the most vulnerable people or groups live in areas with high risks.
- Take some time to discuss, analyze and reflect on the information being shared. Write down the key points with the group. Use the matrix below.

## **Vulnerable Groups note-taking template**

Vulnerable Group VULNERABLE	AGE	SEX	DIVERSITY	RISKS AND SPECIFIC BARRIERS	NEEDS
GROUPS	GROUP			FACED	
For example, Roma children living in the slums outside the village	Children up to 15 years of age	F/M	Part of an ethnic group, has no disability	The slums outside the village are the first to flood when the river rises. The Roma children do not participate in community meetings; communication materials are generally not in their language, and they tend to be discriminated against. The Roma children do not go to school—this means they do not know about any of the disaster risk reduction sessions.	They need to be involved in the process All communication needs to be available in Roma language. Need to identify a way of reaching out to them to identify specific needs

## Presentation of results and sharing of insights and recommendations

• In one big group, ask participants to review the list they made and explain their answers. Emphasize any unmet needs.

#### Review key points and close the session

- Review the key points from the sessions.
- Make sure to review the list(s) and the details.
- Comment on the important information and learning that came out of the exercises.
- Thank the participants for taking part in the discussions.
- Give the participants questions to think about after the session—for example, what can you do to fill the unmet needs of the vulnerable people and groups identified?

## **Session 5: Community Risk Assessment**

**Objective:** • To list and describe current or potential risks

• To identify how these risks could affect the safety and welfare of the community

Output: • Risk Assessment Report

**Duration:** • 1 hour and 30-minute session

**Tool Used:** • Community Risk Assessment (this is flexible and depends on the audience)

Materials • W

White flipchart paper

Needed: • Markers

ScissorsTape

#### **Activity Preparation/Facilitator's Notes**

■ Before the session, a staff member—usually a protection advisor, program manager, or safe and dignified programming staff member—collects the available data on protection risks in the community and organizes it into a Bubble Analysis (see Tool 2 for an example). The Bubble Analysis is a tool to begin the process of looking at protection risks. The tool does not need to include every possible risk to begin the conversation. Make sure to add the risks identified in the Community Hazard mapping exercise.<sup>38</sup>

#### ■ This information can come from:

- Focus group and other discussions
- "Secondary sources"—for example, recent sectoral needs "assessments," gender "assessments" or rapid conflict scans
- Key informants—for example, people who work as leads for the protection cluster or people working in relevant government ministries

#### **Process**

#### Start the session by welcoming the participants

- Explain that this is a continuation of the CLDRM+ process.
- Explain that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.

## Explain the objective of the session

- Explain that the purpose of this session is to identify and describe the risks in the community. Disaster risks mean the deaths, injuries or damage that a system, society or community may experience over a particular timeframe.
- The risk assessment includes risks that already exist and ones that could happen. The purpose is to discuss how these risks could affect the safety and welfare of the community.
- Explain that by the end of this session, they will make a risk assessment report.
- Explain that they should use the <u>Community Hazard and Protection Risk Map</u> and list of vulnerable people and groups they made in previous sessions.

## Identify the challenges posed by hazards

- Ask the participants to start listing the "challenges" posed by hazards in the community. Hazards means any
  event, situation or activity that can cause death, injury, property damage, disruption or environmental
  problems.
- Once the challenges have been listed, ensure that there is common agreement among the group.
- Divide the group into smaller groups of 4–5 people. The size of the small group is flexible and depends on the total number of participants, space, etc. Ask each group to decide who is going to take notes on the discussion. If no one can take notes, then a staff member should help.

<sup>38</sup> Guide to Bubble Analysis: https://efom.crs.org/wp-content/uploads/2019/05/CRS-Protection-Risk-Analsyis-Guide- May-2019.pdf.

- Give each group one of the main "challenges" posed by hazards in the community. For example, assign one group the destruction of houses, loss of specific livelihoods, limited early warning systems and evacuation routes, etc. Consider the most likely hazards in the context and use the top three.
- Make sure someone in each group has the list of vulnerable people and groups that was made in the previous session. This information is needed to do the protection risk assessment exercise.
- Ask the groups to write down the details of the challenges on a big sheet of paper. A staff member should support group conversations if possible. Explain what they should write down using the template provided.

#### **Protection risks**

- Once the groups have identified the challenges posed by hazards, move to the <u>Bubble Analysis</u>. Explain that
  they have talked about challenges related to hazards which can result in disasters throughout the community,
  but there are also "protection risks" which may arise due to existing vulnerabilities. Protection risks mean the
  possibility of someone experiencing danger or harm—including through violence, coercion, discrimination or
  deliberate deprivation. These can affect specific groups or individuals. Use examples from the Social Memory
  of Events Session.
- Looking at the same list of challenges, what are the main **risks** caused by these challenges? Depending on the amount of time, they could limit this to 3–5 risks. Explain that if they need help, they can look at the protection risks in the Bubble Analysis. Ask if any risks are missing from the Bubble Analysis.
- Ask them to identify which **people or groups are affected** the most by each risk. If they need help, they can look at the list of the most vulnerable people and groups they made in a previous session.
- They should also think about the impact of consequences of that risk. Ask them to give a score: low impact = 1, medium impact = 2, high impact = 3.

#### Risk ranking

- Ask the groups to write down the **likelihood/chance** of each risk happening. Ask them to give each likelihood a score: low likelihood = 1, medium likelihood = 2, high likelihood = 3.
- Finally, based on the discussion, they should give a **risk score** for each risk identified (hazard and protection-related risks). This means multiplying the score from the impact by the score of the likelihood. The risk scores can be defined as: low (score of 1–3), medium (score of 4–6), or high (score of 7–9).
- In another session, they will look at the risks with a high score. That is, the risks most likely to happen. We will talk about what we can do to lower the risk.

RISK CATEGORY	PEOPLE AFFECTED	IMPACT/ CONSEQUENCE	LIKELIHOOD (low, medium, high)	RISK SCORE (low, medium, high)
The deaths, injuries or damage that a system, society or community may experience over a particular time	The particular people or groups that will be affected by the risk	What is the result or effect of this risk?	What is the chance of this risk happening?	What is the risk score of multiplying impact by likelihood?
Vulnerable people attacked/robbed after the disaster	Especially vulnerable families headed by single women, elderly people, child-headed household	Victims would suffer in more than one way, e.g., they may have injuries and it may be difficult to recover	This has not happened before in the village— low likelihood	Medium
Flood waters destroy crops	Farming families living in areas where flood waters often accumulate	Loss of crops means loss of money and income base	This happens every few years during the rainy season; the damage can be a little or a lot—medium likelihood	Medium

#### Present results and share insights and recommendations

- In one big group, ask participants to review the risk assessment report they made and explain their answers. After each group presents, ask the other groups if they would add, change or remove anything.
- Make sure to point out any overlaps or gaps between the risk assessment reports.

#### Optional: prioritize the risks

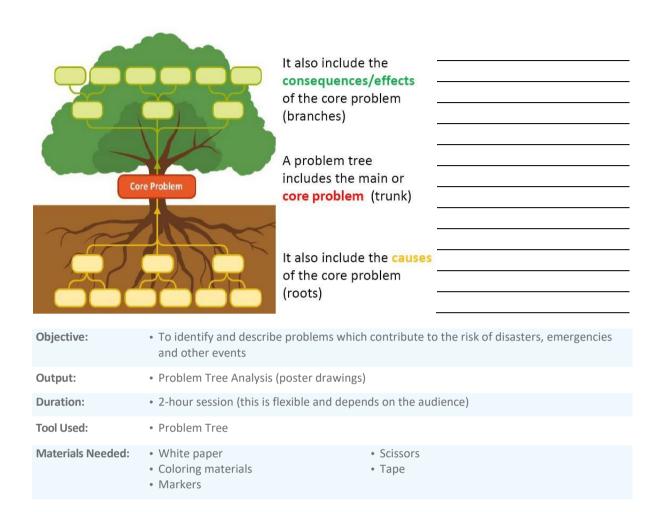
• If it is not clear which risks should be prioritized (based on the score in the risk assessment report) risks will need to be prioritized by community members. Explain the proposed voting procedure.

- Every person will receive two—three stones which they can use to cast a vote for the most important challenges they believe they face.
- Each challenge will have a box or cup placed next to it, where the voting stones will be placed. Ensure that the boxes are out of sight of the other participants so that others do not know who cast votes for what.
- Demonstrate by acting out the voting process and remind participants that everyone should vote according to what they think, and not to follow anyone else. If necessary and preferable, arrange separate locations or areas of the same location for men and women to vote.
- Once the voting is complete, count the votes immediately in front of all participants. Use visual methods to note them.
- Announce the results, highlighting which two—three received the most votes. Explain that other challenges that were not prioritized can remain on the list for when the first priorities have been addressed or when resources become available.

## Review key points and close the session

- Review the key points from the sessions.
- Make sure to review the risk assessment reports and the details.
- Comment on the important information and learning that came out of the exercises.
- Thank the participants for taking part in the discussions.

## **Session 6: Problem Tree Analysis**



#### **Process**

#### Start the session by welcoming the participants

- Explain that this is a continuation of the CLDRM+ process.
- Explain that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.

#### Explain the objectives of the session

• Explain that the purpose of the session is to identify and describe ways to help prevent and reduce the risk of disasters, emergencies and other events.

#### Do the Problem Tree

- Explain that a problem tree is a tool to help identify the reasons why people may be more or less vulnerable to certain risks. It looks at problems and solutions.
- To make a problem tree, the starting point is to analyze the situation. This means looking at the cause-and-effect relationships related to a risk.
  - The reasons ("causes") that people are more vulnerable or at risk are the "roots" of our tree. For example, some causes (roots) could be about a household, a community, an organization or external environment.
  - The effects that a disaster, emergency or other event has on a person or groups of people are the "leaves."
     For example, there can be social, economic, political or environmental effects.
- Divide the group of participants into four or five smaller groups, as needed.

- Ask them to think about the effect that a disaster, emergency or other event has on a person or groups of people. Then, ask them to draw a tree outline on a piece of paper, with the largest space for the roots and treetop. Once they have done this, stick the trees to the wall.
- Explain that:
  - The trunk is the risk. Ask them to write down one of the most likely risks identified in the trunk.
  - The leaves are the effects of the disaster, emergency or event. Ask them to write down as many effects as possible, using one leaf for each effect. Remind them to use the information they talked about in earlier sessions. Make sure they include "leaves" or effects for different kinds of people or groups.
  - The roots are the causes. Ask them to think about the factors in place that contribute to disaster events. Ask them to write down the causes of that disaster in the roots. Once the groups are done drawing the causes, ask them to think about what makes those causes. They should draw a line under each cause; under that line, draw a smaller root connecting to it. On that small root, write what makes this cause. It is useful to keep asking questions like "why?" or "what explains this?" and keep writing more causes (or roots). They should do this until they think they have found the "root cause"—that is, the things that are the source of many problems.



It is better if each group chooses a different risk; if needed, give an example—such as the risk of flooding.

- Ask:
  - Why did the flood happen? It happened because the heavy rain overflowed the riverbanks.
  - Why did it happen? Because there was a lot of garbage in the river and not enough space for the water to flow.
  - Why was there garbage in the river? Because everyone throws their waste in the river.
  - Why does everyone throw their waste in the river? Because there is no garbage disposal system.
  - Why is there no garbage disposal system? Because it is not seen as a priority by key decision makers.
  - Why is it not seen as a priority? (If they cannot answer this question or any of the other questions, it means they have found the "root cause.")



Often in the activity, people cannot easily agree about causes and effects. Help groups use some form of consensus decision-making; this activity can take a long time, so it is important to set a time limit and stick to it.

## Review key points and close the session

- Review the key points from the sessions.
- Thank the participants for taking part in the discussions.
- Explain the next steps.

## **Session 7: Community-Centered Solutions**

Objective:	<ul> <li>To identify and describe ways to help prevent and reduce the risk of disasters, emergencies and other events</li> </ul>	<ul> <li>To identify and describe ways to help people cope with the impacts of disasters, emergencies and other events</li> </ul>	To use these ideas in tools or models that are in a Disaster Management Plan		
Output:	Brainstorm of potential solution	ns (poster drawings)			
<b>Duration:</b>	2-hour session (this is flexible and depends on your audience)				
Tool Used:	Solution modeling				
Materials Needed:	<ul><li>White paper</li><li>Coloring materials</li><li>Markers</li></ul>	• Scissors • Tape			

#### **Process**

#### Start the session by welcoming the participants

- Explain that this is a continuation of the CLDRM+ process.
- Explain that all different kinds of people from the community are welcome to take part in the CLDRM+
  process. This is why people from different groups in the community have been invited to this session. It is
  important that everyone helps to create a space where people's opinions are valued and heard.

#### Explain the objectives of the session

- Explain the purpose of the session is to:
  - To identify and describe ways to help people cope with the impacts of disasters, emergencies and other events
  - $\ ^{\square}$  To use these ideas in tools or models that are in a Disaster Management Plan
- Explain that by the end of this session, the group should have solutions for the risks they decided were the most likely to happen (risks with a likelihood of "3" of above in the last activity). If there is time left, they can also find solutions for the events that are less likely to happen.

#### Explore the solution modeling exercise

- Ask the participants to divide into the same groups from the last session.
- Ask them to look at the risk assessment report they made. They should come up with ideas on how to prevent
  or reduce the prioritized risks. They can also think about ways to help people cope with the effects of when a
  disaster, emergency or other event happens.
- First work on the risks that are most likely to actually happen. Explain that sometimes it is possible to decrease the likelihood that a risk happens or how bad its effects are. One way to do this is by increasing the knowledge and skills of people and groups in the community on how to:
- Manage and cope with effects
- Reduce the vulnerability of particular people and groups
- Reduce the likelihood of that event happening
- For example, if high crime has been identified in a specific area, some options to decrease the likelihood could include:
  - Adding lights, safety patrols or cutting the high grass in the area
  - Increasing people's knowledge about the risks in the area and help them find safer routes to use, safer times of the day to travel or safer ways to travel (for example, travel in groups)
- Explain that they will focus on one risk at a time, using one sheet of paper per risk. Ask them to draw or write down all the details of how this particular risk could be prevented or reduced. They should include all the solutions they can think of, even if they are not sure those solutions are realistic.
- Ask them to make sure someone in the group takes notes. They should use the Community Solutions notetaking template.
- After groups have written down all their solutions, ask them to prioritize the solutions that they want to focus
  on.

- Next they should put their solutions into two categories:
  - We Can Do: These are solutions that people, households, groups and the community can put into action with the skills, knowledge and resources they now have.
  - We Need Help: These are solutions that require support from the government, non-governmental organization (NGOs) or others. This can be financial support, technical support, etc.
- For the "We Need Help" category, ask the groups to write down exactly what they would need from the organization or government agency that wants to help. Remind them that if they need help with ideas on who can help, they can look back at the <a href="Map of Disaster Responders">Map of Disaster Responders</a> they prepared to find organizations from outside the community who can help.



When they come up with ideas to prevent or reduce risks, it is important to make sure these solutions would not cause new risk or harm.

#### Presentation of results and sharing of insights and recommendations

- In one big group, ask participants to present and explain their solutions. The groups should first present their "We Can Do" ideas. Then everyone presents the "We Need Help" category. After each group presents, ask others to comment, reflect and analyze the solutions. They should think about how relevant they are, how much time it takes to put into action and how practical it is.
- Make sure to point out any overlaps or gaps between the solutions.

#### Review key points and close the session

- Review the key points from the sessions.
- Make sure to review the solutions and the details.
- Comment on the important information and learning that came out of the exercises.
- Thank the participants for taking part in the discussions.

Community Solutions note-taking template

RISK	SOLUTION	RESOURCES	RESOURCES	ACTORS	CAN DO
		NEEDED	AVAILABLE	INVOLVED	SOLUTION/NEED HELP

## Session 8: Developing the Disaster Risk Reduction Plan

Objective:	To draft a Disaster Risk Reduction Management Plan that has been designed by the participants
Output:	Community Disaster Risk Reduction and Management Plan
Duration:	1-hour session (this is flexible and depends on your audience)
Tool Used:	Disaster Risk Reduction Management (DRRM) Planning Template
Materials Needed:	<ul><li>White flipchart paper</li><li>Markers</li><li>Tape</li><li>DRRM Planning Template</li></ul>

#### **Process**

## Start the session by welcoming the participants

- Explain that this is a continuation of the CLDRM+ process.
- Explain that all different kinds of people from the community are welcome to take part in the CLDRM+ process. This is why people from different groups in the community have been invited to this session. It is important that everyone helps to create a space where people's opinions are valued and heard.

#### Explain the objectives of the session

- To draft a Disaster Risk Reduction Management Plan that has been designed by the participants
- To assign responsibilities and resources
- Explain that during this final session, they will continue to work on the risks and solutions they prioritized in the previous session; then they will create a disaster risk management plan on which they all agree
- Ask the participants if they have any questions with the process up to this point

#### Draft the DRRM Plan

- Review the priority risks and solutions from the previous session. Ask if they still agree with them. Lead a conversation about any changes, if necessary. People may want to add, change or remove information.
- Ask the participants to split into small groups (use the same groups as the previous exercise if doing them in the same session). They should look in detail at each of the solutions they prioritized, and then list:
  - Steps and activities they need to do to put the solution into action
  - Resources needed (these can be local resources or resources from outside of the community)
  - Which actors are needed to make sure each solution can happen, e.g., exactly which person, committee, structures would be needed
  - Time needed to put this solution into action and the timeline for the different steps
- When the note-taking template is filled out, ask them to reflect on and analyze the plan. They should ask themselves these questions:
  - Is there anything in the plan they disagree with? Why?
  - What are they able to contribute to the plan? (These can be resources, skills or knowledge they have within their community.)
  - Do they know anyone who wants to take part in the plan, but who needs help to be included in the process? Who? How can they be contacted? How can they be included in the process?

#### Presentation of results and sharing of insights and recommendations

- In one big group, ask participants to present and explain their solutions. After each group presents, ask others to comment, reflect and analyze the solutions. They should think about how relevant they are, how much time it takes to put them into action and how practical they are. Collectively agree on which ones can be adopted and integrated into community systems.
- Once the plan has been finalized for each solution, explain that local authorities (if not already in attendance)
  will be provided with the plan and a formal agreement will be made regarding any contributions required
  from the government, etc.



Make sure to point out any overlaps or gaps between the solutions.

## Review key points and close the session

- Review the key points from the session.
- Make sure to review the plan and the details.
- Comment on the important information and learning that came out of the exercises.
- Thank the participants for taking part in the discussions.

# Community Solutions Aimed at Prevention or Mitigation of the Specific Risk note-taking template

NAME OF SOLUTION:  Activities Person(s) Start End Materials Provided by Financial Resources Provided by									
Activities	Responsible	Date	Date	Community/	Implementing	Other	Community/	Implementing	Others
				Household	Agency		Household	Agency	

## Community Solutions Aimed at Preparedness or Response Towards a Specific Hazard note-taking template

HAZARD TYPE (flood, drought, etc.)	SITUATION/SIGNS	WARNING SIGNAL	ACTIONS TAKEN BY HOUSEHOLDS	ACTIONS TAKEN BY DRM COMMITTEE	PERSON IN CHARGE (who issues the warning signal)

## Tool 1: Table of tools

TABLE 1: COMMON TOOLS USED ACROSS DIFFERENT DRR TOOLKITS	DRR TOOLKITS REFERENCING TOOL	CLDRM+ PLANNING FACILITATION GUIDE ALIGNMENT	PM INTEGRATION
Institutional and Social Network Analysis	CRS-CLDRM+ (2), Plan-HVCA, IFRC-VCA, SCI-HVCA, WV-COVACA, TF-PADR, ADPC- CBDRM	2. Disaster Responders Mapping	
VENN Diagram	IFRC-VCA, TF-PADR, AA-PVA,		
Seasonal Calendar	CRS-CLDRM+ (3), Plan-HVCA, IFRC-VCA, SCI-HVCA, TF-PADR, ADPC-CBDRM, AA- PVA		
Historical Profiles/Timelines	CRS-CLDRM+ (4), IFRC-VCA, SCI-HVCA, TF-PADR, ADPC-CBDRM, AA-PVA,	1. Social Memory of Events	
Transect Walk	CRS-CLDRM+ (5), Plan-HVCA, IFRC-VCA, SCI-HVCA, WV-COVACA, CARE-CVCA, TF- PADR, ADPC-CBDRM		
Hazard Mapping and Identification/Risk and Resource Mapping	CRS-CLDRM+ (5), Plan-HVCA, IFRC-VCA, SCI-HVCA, TF-PADR, ADPC-CBDRM	4. Community Hazard Mapping	Bubbles analysis (to be used by a protection staff)
Hazard/Risk/Problem Ranking	CRS-CLDRM+ (6), Plan-HVCA, SCI-HVCA, TF-PADR, ADPC-CBDRM	5. Community Risk Assessment	Might be common protection threats
Problem Tree	SCI-HVCA, ADPC-CBDRM, AA-PVA		
Causal Flow Analysis	WV-COVACA, TF-PADR		
Vulnerability Analysis	Plan-HVCA, IFRC-VCA, SCI-HVCA, ADPC- CBDRM, AA-PVA	4.3 Vulnerable Groups Mapping	SAD line
Coping Analysis	IFRC-VCA, ADPC-CBDRM, AA-PVA		
Capacity Analysis	IFRC-VCA, SCI-HVCA, WV-COVACA, ADPC-CBDRM		
Community DRR/DRM Action Planning	CRS-CLDRM+ (7), Plan-HVA, SCI-HVCA, WV-COVACA, ADPC-CBDRM, AA-PVA	6. Community-Centered Solutions	
Community Contingency Plans			

AA-PVA: ActionAid Participatory Vulnerability Analysis Guide

ADPC-CBDRM: Asian Disaster Preparedness Center Community-based Disaster Risk Management

CARE-CVCA: CARE Climate Vulnerability and Capacity Assessment

CRS-CLDRM+: CRS Guide to Community-Led Disaster Risk Management (# indicates Process number)

IFRC-VCA: International Federation of the Red Cross and Red Crescent Societies (IFRC) Vulnerability and

Capacity Assessment

**OXM-PVA:** Oxfam Participatory Capacities and Vulnerabilities Assessment

Plan-HVCA: Plan International Hazard Vulnerability and Capacity Assessment

SCI-HVCA: Save the Children Hazard Vulnerability and Capacity Assessment

TF-PADR: Tear Fund Participatory Assessment of Disaster Risk

WV-COVACA: World Vision Community-Owned Vulnerability and Capacity Assessment

#### Tool 2: Example of bubbles analysis—Philippines

Compiled for the Typhoon Haiyan response in January 2014. Sources: MIRA II, GPC updates, OCHA updates

#### SGRV

- Increased risk of rape in overcrowded conditions in evacuation center houses
- Transactional sex
- Domestic violence

#### **Excluded Groups**

- Groups not receiving assistance—including minority/indigenous groups, rural and remote areas
- Children, older persons, PLWD not accessing some assistance

## Labor/economic vulnerability

- Risk of exploitative work practices, especially children and women
- Trafficking—loss of homes and livelihoods

## Protection Risks Philippines January 2014

#### Documentation

- Loss of birth certificates/ID papers: limits access to key essential services
- · Loss of land title documents

#### Psychosocial

- Trauma from the Typhoon
- Anxiety/stress from lack of information/participation in the response
- · Fear of insecurity
- Lack of communication with family/friends

## Family separation

Ongoing family reunification

#### Housing, land and property

- Linked to issue of ID documents and loss of land titles
- Relocation of families form "unsafe" zones
- Vulnerable groups requiring support to repair/rebuild risk exploitation

#### Key facts:

Approx. 6,000 deaths; over 1,700 missing;

4.1 million displaced; 14 million people affected;

1.1 million houses damaged

## Deaths, injuries, general safety

- Debris and damaged houses
- General feeling of insecurity

#### Tool 3: Common protection risks

#### Sexual and gender-based Sexual violence violence (SGBV) Physical violence Psychological violence (emotional abuse, isolation) Harmful practices—such as female genital mutilation/cutting, early or forced marriage, "honor" crimes, witchcraft accusations or female infanticide • Increase in negative coping mechanisms—such as early or forced marriage, sex in exchange of favors/food Physical violence—such as corporal punishment Child protection Sexual violence Forced recruitment to armed groups or gangs · Child labor · Separation or unaccompanied minors · Psychosocial distress and mental disorder General insecurity and criminality Physical safety of civilians Forced displacement • Deliberate controls on freedom of movement (conflict scenario) · Deliberate targeting of civilian or protected infrastructure—such as schools, hospitals, conflict scenario · Landmines and explosive remnants of war Housing, land and property • Forced or natural hazard-induced displacement Loss of land tenure documentation (lost or destroyed) Forced evictions Destruction of property · Lack of land, property and housing rights for specific groups (women, persons with disabilities, marginalized groups) Risks associated with loss • Refers to any risks that obstructs economic well-being—such as closure of business venture, bankruptcy, applying loans to loan sharks and other informal credit systems of livelihoods, household income and other economic threats **Exclusion or lack of access** • Lack of information on available services or assistance Lack of documentation to services (to be • Exclusion/marginalization/stigmatization of specific groups discussed with reference • Language and literacy barriers to accessing services or information on services to particularly vulnerable groups) Risks posed by external • Exploitation and abuse of power by anyone linked to humanitarian assistance and development programs aid/development actors · Other forms of humiliating or degrading behavior

## PART 2: SHOCK RESPONSIVE SYSTEMS

#### Summary

**Part 2** has tools to support local shock-responsive systems. The tools are designed for local disaster risk reduction (DRR) and humanitarian actors. It includes guidance on how to develop or adapt feedback mechanisms, referral pathways and Codes of Conduct. It also has a simulation exercise to test response systems.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

#### List of the Tools

List of the Tools			
Introduction to tools to support shock-responsive protection and accountability systems		Overview Lessons learned	
2.1: Context analysis and consultation tool for feedback mechanisms	To help local DRR and humanitarian actors choose the best shock-resistant feedback mechanisms		This tool gives an overview of whether feedback mechanisms exist in the community. It also helps clarify if they are reliable during a disaster, and what changes can be made to make sure all members of the communities can use them.
2.2: Feedback mechanisms standard operating procedures (SOPs)	To help local DRR and humanitarian actors set up shock- responsive feedback mechanisms	Tool that can be adapted	This tool helps record the protocols and processes related to the feedback mechanisms.
2.3: Developing a referral pathway for essential protection services	To help local DRR and humanitarian actors map protection services and develop referral pathways	Six-step tool	This tool focuses on understanding the protection landscape and getting in touch with the different protection actors. It requires DRR and local humanitarian actors to engage with protection actors at multiple levels, starting at the national level down to local service providers. It is important for DRR and local humanitarian actors to reflect on the support and informal service providers that exist at the community level, as there are often gaps in formal service provision at the local levels.
2.4: Code of Conduct Toolkit	To help local DRR and humanitarian actors develop or adapt a Code of Conduct	Set of four tools	This tool gives guidance on how to develop or revise a Code of Conduct. It also advises how to share the content of the Code of Conduct with local communities in an understandable and accessible way.
2.5: SIMEX facilitation guide	To test the feedback mechanisms in place and develop an improvement plan	Simulation exercise facilitation guide, handouts and score card	This tool guides a simulation exercise to practice receiving and managing a sensitive complaint. It involves testing the policies and procedures in place to receive the feedback and use referral pathways to orient survivors to local services. By the end of the session participants should have a clear understanding of any gaps and challenges in handling sensitive complaints. They should also have an action plan for improvements.

#### Lessons from using the tools

■ The tools in Part 2 on feedback mechanisms respond to the lack of general guidance for DRR actors on designing feedback mechanisms with community input. Local DRR and government actors often have various mechanisms at the national and local levels. However, communities are rarely consulted on their preferred feedback options. There is often no appropriate way to manage sensitive feedback. The tools should be used by DRR and local humanitarian actors to adapt and expand existing systems, address gaps and clearly map out a working and formalized feedback mechanism. A good approach is to build on what already exists in the community. Adapting existing mechanisms makes it easier for communities to adjust. This means they are more likely to be accepted, trusted and used by local communities.

"[Safe and Dignified Programming] has promoted empowerment in the villages where we are operating because all the community members have clear information and can now report any protection issues as they occur in their areas."

## —PARTICIPATING COMMUNITY DEVELOPMENT OFFICER IN BUDUDA, UGANDA

- The tool on mapping and referral pathways responds to a gap in linking DRR actors with protection service providers. In all three countries, some level of protection services existed but DRR actors were unaware of them. Coordination between different government levels was lacking and formalized referral pathways were absent. Learning from the project highlighted the importance of using tools that that engage multiple levels of protection actors and link them with DRR actors, helping to harmonize and connect service providers. This section of the toolkit also includes an exercise for DRR and local humanitarian actors to reflect on informal support and service providers that exist at the community level. This is particularly important because there are often gaps in formal service providers at the local levels.
- The tools for strengthening Codes of Conduct should be used in line with local and national policies and legal frameworks. Many countries already have national level Codes and Standards; local DRR and humanitarian actors need to respond to these. However, there may be gaps in these Codes. For example, it is important to understand if there are any explicit references to the protection against sexual exploitation and abuse and whether staff members are trained on/aware of the Codes. A useful learning outcome from the project was to consider the different entry points for supporting the development and revision of Codes of Conduct. DRR actors at different levels (for example, at the village or district level) may find it helpful to check their existing Code of Conduct against international standards or to create their own simple Code of Conduct. When possible, it is helpful to work with local governments to review existing Codes of Conduct and support advocacy efforts with duty bearers if amendments are needed.
- It is important to build trust with the community by making sure there are efficient systems in place. This means involving communities in the development and management of feedback mechanisms. Trust can be built by responding quickly to feedback and complaints received and making use of the referral pathways. It is also important to strengthen community structures that help maintain the systems. This includes community Safeguarding Agents.

# Part 2: 2.1 Context Analysis and Consultation Tool for Feedback Mechanisms

#### Introduction

This tool is not just a checklist. It is a guide to help local disaster risk reduction (DRR) and humanitarian actors work with communities in disaster-prone areas when reviewing or setting up a shock-responsive feedback mechanism. This tool can help DRR actors analyze how communication works in the targeted community and whether feedback mechanisms exist in the community. It also helps clarify if they are reliable during a disaster and what changes can be made to make sure all members of the communities can use them.

#### What is the purpose of this tool?

This tool is designed to help DRR and humanitarian actors:

- Understand whether existing feedback mechanisms already exist in the community;
- Analyze whether the feedback mechanisms are adaptable or reliable during crises; and
- If the feedback mechanisms are not adaptable, reliable or available, this tool will help with the design of an effective feedback mechanism that all members of the community can use.

#### When to use this tool?

Ideally use this tool during emergency preparedness activities.

#### How to use this tool?

It is recommended to organize focus group discussions (FGDs) with different members of the community to understand how widely available, effective and accessible are feedback mechanisms in different disaster-prone areas. To collect information effectively, consider doing a stakeholder mapping of the area first. This will help identify who should be invited to respond. The steps involved are:



After these steps, an assessment report can be developed with recommendations on the community's preferred shock-responsive feedback, complaints and response mechanisms.



If using the Community-Led Disaster Risk Management (CLDRM)+, the tools in Session 2 (Mapping of Disaster Responders and Communication Preferences) ask similar questions. It is not recommended to use both if there is a risk of duplication.

#### Who to involve?

Involve a range of stakeholders—including diverse members of the community.

#### **Key definitions**

**Community:** This is a group of people who share or are thought to share cultural, religious or other social characteristics and have a collective identity and shared goals.

**Complaint:** A complaint is when a person expresses that they are angry, dissatisfied or disappointed with an organization because of something it did or something it failed to do.

**Feedback:** This involves people's opinions, complaints and suggestions about how organizations behave and what they should/should not do.

**Feedback mechanism:** This is a formal system that helps people who get assistance or are affected by a crisis to tell organizations if the assistance is helpful or if they have complaints.

#### Analyze the context

Focus on these elements during the context analysis:

#### Disaster events that often happen in the community

Here are two examples: are typhoons more frequent than earthquakes in some areas; are volcanic eruptions more likely than tsunami events? This type of information is useful to understand the fragility of certain feedback channels.

### Existing government frameworks for DRR and any requirements for communication and sharing information with communities

In some places the government may require that all DRR actors have early warning systems to warn communities of dangerous situations. This information is helpful to understand how the feedback mechanism will fit into this system.

Existing government approaches to feedback mechanisms for protection and shock-related information

In some contexts, the government will already have set up helplines to report child protection or gender-based violence. It is important to understand if other government bodies use helplines or other feedback channels that already exist. This can help identify opportunities for expanding the channels for other protection and disaster-related issues.

#### Community dynamics and information-sharing culture

Existing secondary data<sup>39</sup> can be used to understand if the targeted community regularly shares information or complaints with external actors. Secondary sources can include reports from organizations that work in the area—including rapid needs assessments and local knowledge. Key questions to consider include:

- What is the communication landscape?
  - How do different groups—including men and women, people with disabilities, older people, young men/women and children (boys and girls)—share information?
  - What barriers can prevent different community members from getting information or using communication channels?
  - Is face-to-face communication between the sexes culturally appropriate?
  - Is technology—such as mobile phones and the internet—accessible regardless of gender, age, disability, literacy, ethnicity, language and socioeconomic status?
  - Do community members receive information through traditional means? What are they?
  - Which languages are most commonly used to communicate with men and women, people with disabilities, the elderly, young men/women and children (boys and girls)? How often is this in their primary language?
- What can affect people's ability to give feedback or complain?

-

<sup>&</sup>lt;sup>39</sup> Several sources can be used for secondary data. For example, Information and Communication Technologies (ICT) Working Group, Gender Analysis Report, The New Humanitarian website, Multisectoral Assessment Report, etc.

- Who are the most vulnerable and marginalized groups, based on gender, age, disability and other relevant factors (for example, minority ethnic, religious or political groups)? Does their status stop them giving feedback or making complaints?
- Does the preferred language of diverse groups in the community stop them from giving feedback and making complaints?
- What are the literacy rates across diverse groups according to gender, age and other relevant factors?
- What other barriers could community members face if they file a complaint? Common barriers include fear of losing access to services, fear of non-governmental organizations (NGOs) leaving the area, and fear of punishment if they complain about staff behavior.

#### Government data protection and data sharing protocols

Carefully read any written government policies or protocols on data management to make sure the planned feedback mechanism will be in line with them. For example, what information should be shared with which government or NGOs? Which personal details should be recorded when feedback is given by community members?

#### Consult the community

To make sure the feedback mechanisms are inclusive and accessible to community members, consider doing targeted consultations to understand community preferences for feedback channels.

In these consultations, it is important to include a diverse cross-section of the target community to make sure that channels are appropriate, safe and accessible to all groups, regardless of gender, age or other diversity factors. At the very least, talk to men and women separately. It is best to also speak separately with groups that are considered vulnerable. Be sure to include older people, local or traditional authorities, speakers of marginalized languages, people with disabilities and representatives of youth groups and women's associations.

Use these focus group discussions to understand their perspectives on existing communication channels, their communication preferences and any feedback/complaints channels they are using.

The following questions can guide discussions with representatives of diverse community members:

#### ■ Exploring existing feedback mechanisms

- If you have concerns about DRR and other humanitarian actors working in the area, where can you report them? How do you report them?
- Are there channels that you use to share information about disaster interventions or other concerns with DRR committees, government bodies or other humanitarian actors?
- What are those channels? Who can use them? Who manages them? Who cannot or does not want to use them, and why?

#### ■ Feedback channel preferences

- How would you prefer to give feedback or make a complaint to DRR and humanitarian actors about staff hehavior?
- If a complaint was regarding a sensitive issue—such as sexual abuse—would you prefer a different reporting route? What would that be?
- How would you prefer to give feedback to DRR and humanitarian actors about how well and how much they support you?

#### Literacy issues and other barriers

- In which language do you prefer to communicate with DRR and humanitarian actors? What language do you prefer for written communication? What language do you prefer for spoken communication?
- Are there people in your community who cannot give written feedback and complaints to DRR actors? Who
  are they?
- How can DRR actors help women, men, older people, people with disabilities and people living in remote areas to share feedback and complaints in a safe and dignified way?
- Are DRR actors able to read and manage complaints and feedback in all the languages of the community?
- Are there other barriers that stop people from giving feedback and making complaints to DRR actors? How could DRR actors reduce or remove those barriers?
- Is your community covered by a mobile/phone network? Do women, men, older people, people with disabilities and young men/women have access to phones? Do phones have the correct scripts for local languages?

#### Analyze the results and choose the appropriate channels

Data collected as part of this process should be disaggregated—at the very least, by age, sex and language. Ideally, it should be disaggregated by disability and any other diversity factors that are relevant in the context (social, economic or political factors). Table 1 can help with the choice of the most appropriate channels.

**TABLE 1: SUMMARY OF COMMUNITY CONSULTATION** 

TARGET GROUPS TO CONSIDER (please add relevant groups for the context)	COMMUNICATION BARRIERS	PREVIOUS CHANNEL MOST USED OVERALL	PREVIOUS CHANNEL MOST USED FOR SENSITIVE COMPLAINTS	SAFETY CONCERNS ABOUT GIVING FEEDBACK AND COMPLAINTS	PREFERRED CHANNEL FOR SENSITIVE COMPLAINTS	PREFERRED CHANNEL FOR PROGRAMMATIC FEEDBACK AND COMPLAINTS
Women						
Men						
Girls						
Boys						
Adolescent girls						
Adolescent boys						
Older women						
Older men						
People with restricted mobility						
People with other forms of disability (specify)						
Speakers of marginalized languages (specify)						
Minority groups (specify)						

Use the context analysis to decide which priority groups should be consulted so that all community members can safely access the feedback mechanisms (including people with disabilities, refugees and/or internally displaced people and minority groups).

Discuss the findings of each step with other DRR actors and government bodies to work out which channels members of the community prefer. Keep a record of community consultation results in a table like the one above.

These results can be used with information from the feedback channels pros and cons list to choose one of the channel tools in Table 1.

Based on an analysis of the primary data, choose several channels that are safe and accessible for all community members. Consider diverse groups—including women, girls, people with disabilities or speakers of marginalized languages. Also consider donor and government requirements and staffing/funding when making decisions. If possible, give feedback to community members on how the decision to set up the specific mechanism(s) was made so that community members see how their preferences and needs were considered.

#### Feedback channels pros and cons<sup>40</sup>

The information below gives a summary of the pros and cons of different feedback channels. The choice of feedback mechanisms should be based on community members' preferences, but there are other factors to consider. This information can help narrow down the options to suit the context.

#### Suggestion box

Community members can leave written feedback and complaints in a secure box.

#### **Advantages**

- Can have a wide reach if placed in high-traffic areas
- Easy to set up in small-scale projects
- Accessible to people who are not program participants
- Suitable for anonymous or confidential complaints (but the location of the box could limit privacy)
- Can be placed in the community for a long time, so members can access it at any time
- Can be mobile

#### **Disadvantages**

- Not suitable for community members who cannot read and write
- Can exclude people with limited mobility—such as people who live in remote locations or older people
- Not ideal for communities spread out over large areas or for urban or large camp settings
- Going through and responding to written feedback can be slow
- It may be difficult to respond to individuals or communities if they do not give enough contact information
- Can be destroyed in a disaster—such as a typhon, flood or earthquake
- Responders may not be able to manage written communication in several local languages

#### Hotline and short message service (SMS): Single prepaid account (managed in-house)

Community members can call a number and give feedback directly to a staff member.

#### **Advantages**

- Very accessible if the location has good network coverage and if diverse program participants use mobile phones
- Suitable for remote areas and large-scale responses
- Suitable for anonymous or confidential complaints; however, if calls can be traced, this could be a barrier
- Easy to use for people with low digital literacy
- Accessible to people who are not program participants
- It is possible to quickly acknowledge, respond to and refer complaints
- Can be used to tell disaster actors about a disaster event and ask for prompt support
- Can be multilingual

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<sup>&</sup>lt;sup>40</sup> The content of this document is from the CRS MEAL in Emergencies e-learning course (2015). Click on the link to find a revised comprehensive version on the CRS EFOM site <a href="https://efom.crs.org/wp-content/uploads/2021/11/Tool-3.docx.">https://efom.crs.org/wp-content/uploads/2021/11/Tool-3.docx.</a>

#### **Disadvantages**

- Requires set-up time, which may be too long for short projects
- Excludes community members who do not have access to a mobile phone, phone credit or electricity to charge a phone
- Can be expensive for callers if there is no toll-free number
- Personal data may not stay confidential
- There may be long delays in responding if the hotline has high traffic
- Some disaster events can interrupt phone coverage

#### Hotline: Interactive Voice Response (IVR)

This is a dedicated number for community members to get information and record their feedback message.

#### **Advantages**

- High accessibility (24/7) if there is good network coverage
- Program participants can call at any time
- Can help decrease the amount of feedback and complaints received because questions can be answered with key information
- Can be free for communities
- Suitable for anonymous or confidential complaints (the caller can decide if they want to leave contact information)
- Easy to use for people with low digital literacy
- Can be multilingual

#### **Disadvantages**

- More effective for sharing information than managing feedback and complaints
- Excludes those who do not have access to a mobile phone, phone credit or electricity to charge a phone
- Can be expensive for users if there is no toll-free number
- High staffing and resource costs: there must be an agreement with a service provider and staff time to listen to and log messages (alternatively, software can be purchased)
- Feedback may not include details needed for follow-up (e.g., name of agency the feedback is about, contact information), especially if feedback does not fit into set categories
- Audio must be transcribed and translated to manage multiple languages

#### Face-to-face with staff

Individuals can approach staff (community liaison officers with specific responsibilities to work on feedback mechanisms) in the field; staff members receive and record feedback and complaints directly.

#### **Advantages**

- Often one of the most popular channels
- Can reveal if programs are having unintended effects that are not being monitored
- Makes it possible to respond to urgent questions and refer people quickly; can resolve many issues immediately
- Can be multilingual

#### **Disadvantages**

- Staff may find recording feedback time-consuming and tiring
- Staff may think complaints reflect poorly on them and be reluctant to process them
- If there is a disaster event, it can be difficult to reach people in remote areas because roads may be damaged
- During recruitment it is necessary to make sure staff have the appropriate language skills

## Community focal point (sometimes called feedback and complaints committee or community advisory group)

Locally managed focal point/committee appointed by community members are trained to collect and record feedback and complaints.

#### **Advantages**

- Often a popular channel because community members may feel more comfortable talking to a community member than to a staff member
- Increased ownership by community
- Can build on existing social and cultural channels to resolve issues rather than imposing an unfamiliar approach
- Many issues and urgent questions can be resolved immediately; referrals can also be made immediately

#### **Disadvantages**

- Requires training, time and effort from community members
- Complaints go through too many channels
- Usually not helpful for sensitive complaints as people may not feel comfortable reporting complaints to people they know
- Risk of high turnover or low effort if community members are not paid for this work
- Marginalized languages may be overlooked (depends on the focal points)

#### Help desk near project sites or partner offices

Desk or hub is set up at the office or in the field, with set operating hours and trained staff or community volunteers to answer questions and listen to concerns.

#### **Advantages**

- Easy to set up
- Highly accessible when set up with other program activities, like at a distribution site
- Good visibility if set up in high-traffic areas
- Useful in communities with low literacy
- Suitable for confidential feedback and complaints; however, complainants may not want to share information if the help desk is in a public place
- Offers face-to-face contact, which community members often prefer
- Fast and immediate response; possible to resolve many issues immediately
- Staff/volunteers can follow up or ask for more detailed information
- Can offer quick support and orientation if there is a disaster event
- Can be multilingual

#### **Disadvantages**

- Low accessibility for those who are far from the project or office location
- Can be difficult to set up after a natural disaster event if infrastructure was damaged or destroyed
- Less accessible to people who are not program participants if it is set up as part of project activities
- It is not possible to stay anonymous
- Staff must be selected based on language skills

#### Open community meetings

Meetings are organized periodically at project locations that bring together large groups of people to share information and collect feedback and complaints.

#### **Advantages**

- Easy to set up
- Can ask for feedback and complaints from many people in a limited time
- Can involve people who are not program participants
- Can be adapted to the audience (for example, using child-friendly approaches)
- Suitable for communities with low literacy
- Low staffing and resource costs
- Allows immediate response
- Can respond to common questions and concerns immediately and for many people simultaneously
- Can be multilingual

#### **Disadvantages**

- Discussions may be limited if some people dominate the group
- May not be suitable in cultures where public criticism is not acceptable
- Can exclude most marginalized groups (such as women and children) who may not feel comfortable attending or sharing their concerns
- Not suitable for anonymous or confidential complaints
- May need interpreters for speakers of marginalized languages

#### Social media and instant messaging platforms (e.g., Twitter [X], WhatsApp)

This involves a dedicated number or account where people can send written or voice messages and pictures.

#### **Advantages**

- Can have a wide reach if the location has good network coverage
- Good way to quickly collect information about immediate needs in the first phase of an emergency response across a large area
- Can manage anonymous or confidential complaints if user accounts do not contain identifiable information
- Can be multilingual

#### Disadvantages

- Requires good network coverage, access to a smartphone or computer and electricity
- Requires digital literacy to set up and use
- Can create a lot of feedback and questions, which can overwhelm staff
- Risk of online safeguarding issues
- In remote areas, it may be difficult to share the phone number or account with the community
- Requires staff to manage the platforms
- Some natural disasters can affect internet coverage
- Requires fast translation to send and receive messages in several languages

#### Dedicated email address

Individuals can send emails to an address set up for feedback.

#### **Advantages**

- Very accessible and easy to set up if the location has good network coverage and if communities have access to smartphones or computers and electricity
- Suitable for anonymous complaints if user email accounts do not contain identifiable information
- People may see emails as a formal and respectable way to give feedback

#### Disadvantages

- Requires good network coverage, access to smartphone or computer and electricity
- Requires digital literacy
- Risk of online safeguarding issues
- There may be delays in response and flexibility
- Follow-up depends on the user supplying contact information
- Some natural disasters can affect internet coverage

## Part 2: 2.2 Feedback Mechanisms Standard Operating Procedures (SOPs)

#### Introduction

Feedback mechanisms help make sure program decisions are informed by local perspectives and priorities. This contributes to safe and dignified programming. To work well, they need to be properly planned and supported with enough financial and human resources. Local disaster risk reduction (DRR) and humanitarian staff can use Standard Operating Procedures (SOPs) to set up and record the protocols and procedures that support them while they collect, acknowledge and respond to/refer feedback and complaints. This includes sensitive complaints about abuse and exploitation. The SOPs also outline different roles and responsibilities.

#### What is the purpose of this tool?

SOPs are a useful way of recording protocols and processes related to feedback mechanisms.

#### When to use this tool?

The tool is used when feedback mechanisms are set up.

#### How to use this tool?

Adapt this example to the specific needs and context of the feedback mechanism and update it as the feedback mechanism evolves and improves.

#### Who to involve?

The person responsible for managing the program should complete the SOPs with input from other program staff or community safeguarding agents.

#### **Key definitions**

**Complaint:** A complaint is when a person expresses they are angry, dissatisfied or disappointed with an organization because of something it did/did not do.

**Confidentiality:** This is an obligation to make sure that information about a person is not shared without permission.

**Feedback:** This involves people's opinions, complaints and suggestions about how organizations behave and what they should/should not do.

**Feedback mechanism:** This is a formal system that helps people who get assistance or are affected by a crisis to tell organizations if the assistance is helpful or if they have complaints.

#### Section 1: Background

Content should include: An introduction, different feedback mechanism categories, staffing structure.

#### Introduction

[Insert name of organization] is committed to ensuring that all project stakeholders—especially members of the communities and affected populations—can talk directly with [insert name of organization] and that [insert name of organization] will listen to feedback and complaints and respond in a safe, timely and suitable way.

To do this, [insert name of organization] will set up a feedback mechanism.

All community members in [insert the detailed targeted communities] and program participants have the right to give feedback to [insert name of organization] and get a timely and fair response according to the following commitments. [Insert name of organization] will:

- Make sure its feedback mechanism matches the communication preferences and needs of individuals from the targeted communities—including vulnerable and marginalized groups
- Make sure to share information with communities and program participants about the feedback mechanism process, timeline and right to appeal
- Respect the confidentiality of feedback and complaints
- Protect the safety and security of the people who use the feedback mechanism
- Make sure community members who report a complaint do not experience negative consequences

#### Feedback mechanism categories

	CATEGORY	DESCRIPTION
requests)	1. Request for information	Questions about programs, services and who can access them, or about the organization.  For example: When is the next distribution?
(information	2. Request for individual program or service support	A person asks for services they did not receive because of a possible targeting mistake or a bigger problem with access. For example: I can't travel to the distribution site. How can I get assistance?
Programmatic feedback and complaints (information requests)	3. General suggestions to improve service and program	Feedback on the relevancy of high-quality and appropriate services and programming; a request to change how [insert name of organization] offers support now or in future programs.  For example: We need cash grants and training to make a real difference.
ic feedb	4. Appreciation of services or support	Positive comments about activities or support. For example: <i>Thank you for your help.</i>
Programmati	5. Complaints about services or support	A complaint about how timely, appropriate or useful services/support are for the person. For example: Women don't feel safe going to the latrines because they do not have lights.
	6. Alleged violation of the organization's Code of Conduct or Safeguarding Policy	An allegation of misconduct by [insert name of organization] staff (including volunteers, partners, vendors/suppliers or other staff members).  For example: One of your staff asked to marry my daughter.
Sensitive	7. Other protection issues	An accusation of exploitation or abuse that does not involve [insert name of organization] staff or partners. An allegation of protection concerns that affect the communities we support. This includes any reference to exploitation or abuse from a government official, schoolteacher, community member or family member.  For example: I heard a rumor that domestic violence increased in the community after you ran a distribution.
	8. Safety and security concerns	Information related to the safety or security of [insert name of organization] staff, offices or goods, of partners or any organization, or of the communities served.  For example: There is flooding in the area and it damaged the road to the project site.
Other	9. Out-of-scope feedback	A request for support that the project does not offer or programmatic feedback on support that another actor offers. This category does not include safeguarding violations or issues of protection against abuse or fraud.  For example: I have lost my goat. Can you help me find it?

#### Key Roles and Responsibilities

Below is a breakdown of roles and responsibilities related to the feedback mechanism:

- **Overall responsibility** [insert staff title] is responsible to ensure the feedback mechanism is in place/working. They:
  - Make sure the feedback mechanism is in place
  - Handle sensitive complaints

- Make sure there are enough resources and staff time to manage feedback mechanisms
- Make sure staff have the right training on the feedback mechanism (i.e., someone in a director/head of organization role)
- Feedback mechanism focal point or manager [insert staff title] supports the feedback mechanisms. They:
  - Coordinate feedback mechanisms
  - Support teams to run the feedback mechanism
  - Develop the SOP for the feedback mechanism
  - Train staff on the feedback mechanism
- **Field staff and outreach teams** are responsible for receiving, acknowledging, recording and responding to feedback and complaints from various channels. They:
  - Talk to diverse groups in the community and make sure they can access the feedback mechanism
  - Give communities information about how to give feedback
  - Receive feedback through various channels
- Community safeguarding focal points share information with communities about how to give feedback and complaints.
- Monitoring and evaluation staff (if applicable) help analyze feedback and understand if any groups are excluded from the feedback mechanism.

#### Section 2: Feedback and complaints channels

Content should include: Name and description of each feedback and complaints channel, access details for each channel, how to document feedback and complaints, how to acknowledge feedback and feedback/complaints on the channels themselves.

Any individual, household, group of people, organization, partner, program staff, volunteer, contractor or other stakeholder can give feedback about [insert name of organization] projects, activities, staff, partners or suppliers. [Insert name of organization] currently receives feedback through the following channels (delete as needed):

FEEDBACK AND COM	FEEDBACK AND COMPLAINT CHANNEL			
Channel	Description	<b>Details</b> (such as times/hours when it is possible to give feedback, contact details, languages used for feedback, translation services available)		
Suggestion box	Community can submit written feedback and complaints using free text or forms that they put in a secure and accessible box.			
Hotline and SMS: Single prepaid account (managed in-house)	Community members call and give feedback directly to a staff member using a dedicated phone/mobile number or hotline.			
Hotline: Call center (managed by external service provider)	This is a dedicated number that individuals use to phone a call center company that represents [insert name of organization].			
Hotline: Interactive Voice Response (IVR)	This is a dedicated number for community members to access information and record their feedback message.			
Face-to-face with [insert name of organization] staff	These are staff members (such as community liaison officers with specific feedback mechanism tasks) who people in the field can approach and give feedback and complaints to directly.			

FEEDBACK AND COM	IPLAINT CHANNEL	
Help desk near project sites or designated drop-in at [insert name of organization]	This is a desk or station set up at the office or in the field with set operating hours, with trained staff or community volunteers and interpreters who can answer questions and listen to concerns.	
Community focal point (sometimes called feedback and complaints committee)	This is a locally managed focal point/committee, appointed by community members and trained to collect and record feedback and complaints and share them regularly with [insert name of organization].	
Open community meetings	These are regular meetings in communities that bring together large groups of people to share information and collect feedback and complaints. There are also meetings for minority and excluded population groups.	
Regular consultations with key informants or community leaders	Leaders collect feedback and complaints from their communities.	
Project site visits/observations	These activities are done while monitoring a project or program where program participants or stakeholders can give or report feedback on what they have seen or experienced.	
Monitoring methods	Questions can be added about how satisfied the community members/participants are with assistance and services. This way they are prepared in all relevant languages in the community. Examples include household or post-distribution surveys, focus group discussions, key informant interviews, etc.	
Social media and instant messaging platforms (for example, Twitter [X], WhatsApp)	This is a dedicated number or account for people to share written or voice messages and pictures.	
Mail	Individuals can mail letters to [insert name of organization].	
Dedicated email address	Individuals can send emails to an address set up for feedback.	

#### Section 3: Response channels

Content should include: Name and description of each response channel, commitment to replying within a set time to each feedback/complaint category and <u>Tool 1</u>, <u>Tool</u>, <u>Tool 3</u> (response scripts, flow chart, referral pathways).

RESPONSE CHANNEL: HOW [INSERT NAME OF ORGANIZATION] WILL RESPOND TO FEEDBACK AND COMPLAINTS	DETAILS: PROCESS FOR RESPONDING TO FEEDBACK AND COMPLAINT (for example, time commitment, staff responsible, language requirements)
Individual phone call or SMS	
Hotline	
Community noticeboard, banners, posters, leaflets, etc.	
Household visits	
Public community meetings	
Radio show	
Other	

#### Section 4: Managing sensitive complaints

Content should include: Procedures for escalating sensitive complaints, name and contact information of the focal point for sensitive complaints (organization/department leader or staff safeguarding focal point) and <u>Tool</u> 4 (setting up a feedback and complaints registry).

Sometimes complaints will need to be passed on to someone higher up in the organization. Normally, these are sensitive complaints that relate to misconduct (Feedback Mechanism Category 6). Follow these steps:

- Ask the person who is complaining if is okay to be contacted. If they agree, ask for individual contact information. Let them know that someone will be in touch within 3 working days to follow up, depending on the seriousness of the situation.
- Share the complaint with the director/organization leader or person with overall responsibility for the feedback mechanism (as outlined above). Do this within 24 hours of receiving the complaint.
- The [director/organization leader or designate] will decide on the correct referral for follow-up and support. How long this process takes should reflect on the seriousness of the case.

#### Section 5: Communication about the feedback mechanism

Content should include: Communication approaches for community awareness of feedback mechanisms and <u>Tool 5</u> (Information, Education and Communication [IEC] materials).

Program participants and key stakeholders will receive information about the feedback mechanism through the following:

- Different means [insert whether this will be through posters, flyers, notice boards, social media, community meetings, etc.]
- A wide range of materials and methods [insert whether this will be written, pictorial or verbal methods]
- Local languages and terms that people commonly use at home [insert which language the information will be presented]

Key messages to be shared with communities will include:

- Explanation of the feedback mechanism, including:
  - How to give feedback and make complaints through the available channels
  - How soon can they expect an acknowledgment of their feedback or complaint
  - How soon can they expect a response to programmatic feedback and complaints, and sensitive feedback and complaints.
  - The steps that [insert name of organization] will take to protect the safety, confidentiality and dignity of people who make a complaint, including how [insert name of organization] will handle complaints
  - Rights and entitlements linked to the feedback mechanism, including:
  - Their right to give feedback and complaints on [insert name of organization]'s programs and operations
  - That [insert name of organization] welcomes, encourages and takes complaints seriously
  - The right to report any issues of misconduct that relate to expected and forbidden behavior for staff, volunteers and affiliates
  - That sharing complaints will not negatively affect access to assistance or project participation

#### Section 6: Effectiveness check

Content should include: Plans for checking how well the feedback mechanism is working during reflection events, annual effectiveness checks and during evaluation exercises. Use Tool 6.

When planning the effectiveness check, the team will use the feedback mechanism effectiveness check tool and follow these key steps:

**Review the feedback and complaints received** to identify trends—including if and how different groups in the community used the channel. This could include:

- The number and types of feedback and complaints received (categories)
- Whether there have been changes in the number of types of feedback received
- How/if different groups in the community use the mechanism by gender, age, disability and other factors (such as religious or ethnic groups)
- Response rates to the feedback and complaints

**Interview staff** to see if they understand their roles and responsibilities related to the feedback mechanism. Ask about their experiences with it and ways to make the feedback mechanism more effective. This includes finding out the following:

- If staff understand their role in relation to the feedback mechanism
- What extra support or resources would be useful to them
- Their observations about how different groups in the community use the channels and whether these groups trust and value them
- If staff process feedback and complaints properly, and if they keep personal data confidential

Talk to **different groups in the community**, including men, women, children, people with disabilities, older persons and people from other marginalized groups. Use these conversations to understand how they access and use the feedback mechanism and if they trust it. If people are not comfortable using the channel, try to find out why and identify ways to address this. Topics could include:

- Whether different groups in the community are aware of the mechanism, and if not, why
- Their experiences (if any) of using the feedback mechanism
- Which channels they do/do not trust, and why
- Whether they understand what behavior is prohibited and what they would do if they saw or experienced that behavior

**Reflect on the information collected** with Monitoring and Evaluation (M&E), program and field staff to make key recommendations and an action plan. Questions could include:

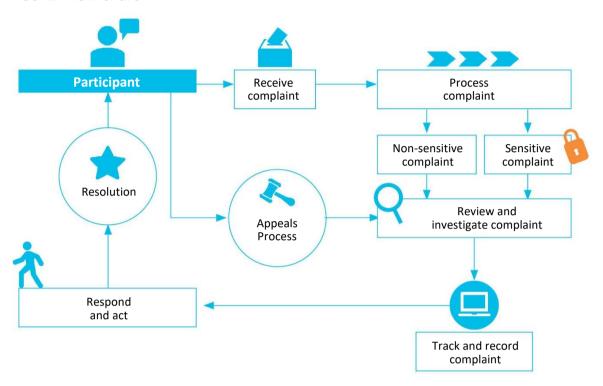
- Which groups are most/least likely to use the feedback mechanism and why; what changes can be made so the community is more likely to use them?
- Are there are any other ways to collect feedback?
- Do all staff members understand the purpose of the feedback mechanism and how to improve it?

**Document and communicate changes** to the feedback mechanism with stakeholders—including donors and communities.

#### Tool 1: Sample script for acknowledgment by channel or category

This is an example of a script that could be adapted: "Thank you for sharing your feedback with us. We will record the information you are giving us to help [insert organization name] and its partners improve their activities and work. We will handle all information confidentially, and only authorized persons will access it. Do you agree to continue?"

Tool 2: Flow chart



#### Tool 3: Referral pathways

Add in the mapping of services and referral pathway.

#### Tool 4: Setting up the feedback and complaints registry

The registry is where information about the feedback and complaints received is logged. It can be as simple as an Excel table. Below are key categories that could be included in the registry.

#### Consent to collect personally identifiable information

The person who is giving feedback gives [insert name of organization] full and clear permission to 1) record personally identifiable information (name and contact details) to contact them for follow-up and 2) to share their contact information with another entity or organization to refer them.

#### Reference number/unique identifier

This is a number that allows [insert name of organization] to easily track feedback and complaints from the system. Each feedback item should have a unique reference number.

#### Administrative information

- Name of the person giving feedback (or note if the feedback was anonymous)
- Sex/gender and age/age group
- Other vulnerability status (if known and relevant)—including disability, unaccompanied minor, member of single-headed households, internally displaced person, etc.
- Location or project site where the feedback originated

#### **Feedback information**

- **Date received:** When someone gave feedback, or the date on which [insert name of organization] received the feedback through a channel—such as a suggestion box, WhatsApp, etc.
- **Channel used:** Hotline, suggestion box, community meeting, SMS, help desk, etc.; also include the name of the staff member who received the feedback
- Feedback/complaint description: Exactly as the individual(s) communicated the information—including timeframe and details
- Feedback mechanism category: Relevant category
- **Preferred means of follow-up:** By phone or in-person to update the individual; make a note of contact information—such as phone number or address, depending on preferences
- Acknowledgment: Confirmation that the feedback/complaint was received □Yes □No

#### Case management

- Program/project/service that the feedback relates to (if any)
- Verification/investigation required? □Yes □No
- Lead point of contact: A staff member who oversees the investigation
- Response/decision: Staff member responsible for deciding how to handle this feedback
- Date when decision was requested: When the decision-maker received feedback
- Decision taken/status: Details on decisions or actions; can use Open/Closed/Referred to track
- Resolution date: When the decision was made

#### Response

- **Response date:** When [insert name of organization] responded to the individual
- Response channel: How [insert name of organization] shared decision
- **Duration of resolution:** Time from collection to resolution

Tool 5: Information, Education and Communication materials (IECs)

Add in any materials developed.

Tool 6: Feedback mechanism roles and responsibilities table

TASKS	PRIMARY RESPONSIBLE	OTHERS INVOLVED	TIMELINE	FREQUENCY	SUPPORT NEEDED
Receive feedback					
Receive by channel 1					
Receive by channel 2					
Acknowledge feedback					
Acknowledge by channel 1					
Acknowledge by channel 2					
Document feedback					
Document by channel 1					
Document by channel 2					
Respond					
Respond by channel 1					
Respond by channel 2					
Escalate sensitive complaints					
Refer feedback					
Support appeals process					
Monitor feedback and resolution					
Feedback mechanism effectiveness					
Check satisfaction with feedback mechanism					
Conduct feedback mechanism effectiveness checks					
Other					

## Part 2: 2.3 Developing a Referral Pathway for Essential Protection Services

#### Introduction

Referral pathways enable people to access relevant protection services designed to prevent or respond to situations of harm, abuse or exploitation. These may include child protection, legal help, psychosocial support or healthcare. As disaster risk reduction (DRR) actors may not be qualified to offer these services, it is important to have reliable, clear information on referral pathways to protection service providers.

The tool deals with two key areas of information: 1) mapping services and 2) developing referral pathways. It does not address a third area—making protection referrals.

- 1. Mapping protection actors and services. This involves finding and documenting all the relevant protection actors in each area. This can include services that governments, non-governmental organizations (NGOs) and community-based and other civil society organizations offer. If the government or Protection Cluster has not already conducted an up-to-date mapping, DRR and humanitarian actors should collect this information, ideally with help from a local protection actor.
- 2. **Developing a referral pathway.** After mapping the protection actors in the local context, DRR and humanitarian actors can use this information to develop a referral pathway. This is a document that shows organizations and program participants how to access essential protection services; it tells them where to go and who to contact for help with a specific protection need. This information can then be shared widely to orient people affected by protection risks toward the services they need.
- 3. Making a protection referral. This means referring at-risk or vulnerable people to appropriate protection actors identified during the protection mapping. Trained staff accompany people with protection needs throughout the referrals process, so they receive the service they need and can access any other recommended services. This should not be undertaken without specific case-management and protection expertise.

#### Purpose of the tool

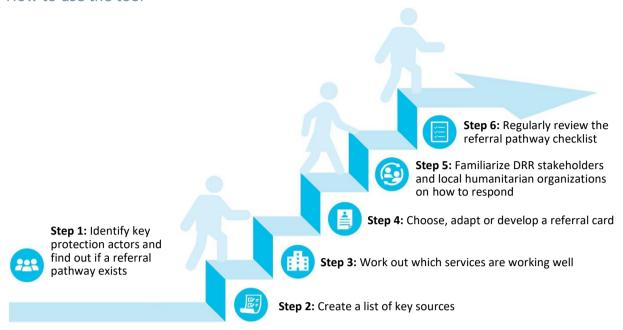
This tool is designed to support DRR and humanitarian actors to:

- 1. Map key protection actors
- 2. Develop a referral pathway
- 3. Help actors coordinate to create an efficient and safe referral pathway

#### When to use the tool

This tool should be used during emergency preparedness activities. However, it is important to update pathways and mappings regularly, particularly after an emergency or disaster. This is because crises often worsen existing protection risks. Services can also be severely affected.

#### How to use the tool



NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

#### Who to involve?

The process should involve national and local protection actors and local communities. It is important to share the information with all staff.

#### **Key definitions**

**Confidentiality:** This involves an obligation to make sure that information about a person is not shared without explicit permission.

**Referral pathway:** A referral pathway is a safe way for people to find different kinds of help, e.g., medical care or help from the police.

**Survivor:** This is a person who has been harmed, sexually exploited or abused.

**Survivor-centered approach:** This is an approach that puts survivors' wishes, safety and well-being at the center of the process, at all times and in all situations.

#### Step 1: Identify key protection actors and find out if a referral pathway exists

- Find out who is the lead in providing protection services in the area. This could be the government, a United Nations (UN) body, a local or international NGO, private sector groups or community-based organizations (CBOs). Check whether the Protection Cluster and Sub-Clusters are activated; if so, contact them and ask what you should do next.
- Ideally, the government and/or Protection Cluster will map available protection services and develop a referral pathway. <sup>41</sup> If a government or UN body is the lead in protection services, contact them for guidance or ask for a referral pathway.
- If there is no referral pathway, find out who is responsible for protection concerns or has expertise in these areas. Do this by researching the roles of different organizations. If necessary, contact government institutions and local authorities to help you find relevant actors.

<sup>&</sup>lt;sup>41</sup> For an example of a referral pathway from the Rohingya response in Cox's Bazar, Bangladesh, see: <a href="https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/referalpathway\_220417.pdf">https://www.humanitarianresponse.info/sites/www.

- Think through who the actors are, their relationships and how much influence they have and where. Do an actor analysis for each protection problem (use data on protection risks using a bubble analysis).<sup>42</sup> Consider different actors, particularly at the local level, such as:
  - CBOs
  - NGOs
  - Local media
  - National and local women's organizations
  - Clubs and groups
  - Academics
  - Social networks
  - Village or community leaders
  - Charities
  - Religious institutions
  - Local businesses
  - Unions
  - Local government officials or departments
  - Police
  - Social services
  - The UN
  - The International Committee of the Red Cross
- Find out with whom you should coordinate. This could include actors who either can respond or have the mandated authority to respond. The more local the referral pathway is, the more useful it will be for people with protection needs. However, only larger actors may be mandated to respond to certain protection issues.

#### Step 2: Create a list of key sources

- Use the mapping to create a list of the key actors to meet. Start with larger national actors with specific protection mandates that oversee protection services rather than offering them directly, including:
  - National governments
  - The UN
  - International non-governmental organization (INGOs)
- Prepare another list of service providers for a second round of interviews. These could be smaller local actors that work on specific protection needs, such as:
  - Local governments
  - CBOs
  - Private sector organizations
  - Women's shelters
  - Health services
  - · Women's and children's helplines
  - Family tracing and reunification services
  - Services for persons with disabilities

(Refer to the Disaster Responders Mapping from the Community-Led Disaster Risk Management (CLDRM)+ guide.)

#### Step 3: Work out which services are available and working well

- Use <u>Tool 1A</u> to get an overview of the service providers that the larger protection actors promote. If there is more than one lead or influential national protection actor, try to contact them all.
- Next, contact service providers directly, using <u>Tool 1B</u> to talk about their services. It is important to understand how they work and who can use their services (e.g., are they child-friendly? are they accessible to people with disabilities? which languages do staff there use?).
- Finally, conduct a community-led analysis to find out about formal and informal protection services using Tool 2.
- Consider how hazards affect service providers themselves and whether they are resilient enough to keep offering services during or after an emergency or disaster.

<sup>&</sup>lt;sup>42</sup> For an example of a bubble analysis see Annex 2 of: Catholic Relief Services. <u>Protection Risk Analysis: Step-by-Steph How-To Guide for Country Program and Partner Project Teams</u>. 2019.

#### Step 4: Adopt, adapt or develop a referral card

- Use the information from <u>Tool 1A</u>, <u>Tool 1B</u> and <u>Tool 2</u> to list the service providers in a table. If possible, develop a referral card (<u>Tool 3</u>), update it regularly, especially after emergencies or disasters.
- Where possible, share your referral card with service providers to check if it is accurate.
- Translate referral cards into local languages or the preferred languages of program participants.
- Print the referral card in a pocket-sized format. Make sure all staff and volunteers have a copy with them during activities. Consider other ways to share this information—such as posters, social media or phone messages.

## Step 5: Familiarize DRR stakeholders and local humanitarian organizations on how to respond

Familiarize DRR stakeholders and local humanitarian organizations with the following information:<sup>43</sup>

- If a person affected/survivor tells you about an incident, introduce yourself. Ask how you can help. Remember the importance of respect, safety, confidentiality and non-discrimination.
- Share correct information about available services.
- If they give permission, give them information about relevant resources and services—including how, when and where to access them, focal points at the services, safe transport options, etc.
- Do not share information about a survivor or their experience with anyone unless they give you explicit and informed consent. Do not record details of the incident or personal information about the survivor.
- If someone other than the survivor (for example, a family member) shares information about someone who has experienced harm, abuse or exploitation, give the former up-to-date and correct information about services and support that are available to the survivor. Encourage them to share this information safely and privately with the survivor. DO NOT approach the survivor yourself. If the survivor is a child, please report the case to the lead child protection actor.

#### Step 6: Regularly review the referral pathway checklist

- During periodic reviews, use the questions in Tool 4 to adjust as necessary.
- Contact national protection actors and service providers regularly to find out if anything has changed. This is particularly important after a disaster. It will help you to understand whether any groups are finding it hard to access services and how to improve this (for example, by changing the language and format of communications or making adjustments for people with disabilities).
- Share the updated referral pathways with staff.
- If there are any concerns about the safety or quality of services or any barriers to access, tell the service provider and any other relevant protection actor. If the Protection Cluster is activated, follow up with it for a quality check on services.

<sup>&</sup>lt;sup>43</sup> You can find more advice on what to say and what not to say on pages 7–10 of: Inter-Agency Standing Committee. <u>How to support</u> survivors of gender-based violence when a GBV actor is not available in your area. 2015.

#### Tool 1A: Sample discussion guide—national protection actors

#### Introduction

Introduce yourself and your organization, and present the purpose of the discussion:

- You are developing or updating a referral card for staff serving people and communities. This will help you give people with protection needs accurate information on how to access essential protection services.
- In this conversation, they will give you some personal information—such as mobile numbers and addresses. As far as they are aware, you want to make sure this does not violate local privacy laws.
- You are asking for their input and expertise on protection services that are available nationally or locally.

#### Questions

Please give me an overview of protection services you recommend for different types of protection issues. For example:

example:

Sexual and gender-based violence

Child protection

Family separation

Trafficking in persons

NOTE: If a referral pathway already exists, ask if it has been updated after a disaster. If not, ask if it will be updated.

If the answer to both these questions is "no," follow the rest of the process below. Use the information below to

What checks have you done on these services to understand if they are safe and accessible to someone regardless of gender, age, legal status and diversity factors, etc?<sup>44</sup>

What challenges do these protection services face? Are any national plans being developed to address these challenges?

How could a disruption—such as a disaster—affect these services? Do the providers have contingencies built in for disaster situations?

Are there any service providers you do not recommend? Why?

<sup>&</sup>lt;sup>44</sup> For further guidance, see: UNICEF. <u>Availability, Accessibility, Acceptability, Quality framework: A tool to identify potential barriers to accessing services in humanitarian settings</u>. 2019.

#### Add a new table for each service provider mentioned:

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

ORGANIZATION	CONTACT PERSON	SERVICE
Organization name	Name	Service 1
	- " "	
Location	Email address	Service 2
Languages services provided in	Phone number	Service 3

#### Tool 1B: Sample discussion guide—local protection services providers

#### Introduction

- Introduce yourself and your organization and present the purpose of the discussion.
- Explain that you are developing or updating a referral card for staff serving people and communities so that people with protection needs can receive accurate information on how they can access important protection services.
- Say you are asking for their input and expertise on the services that are operating in response to [insert the particular issue this service focuses on]. You are also interested in any changes there have been after an emergency or disaster.

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( )	I I P	CT1	0	n	S

Are your services continuing to work? Have you changed anything (e.g., is it easier or more difficult for people to access your services; have you changed your opening hours; do we have your permission to share these details wit our program participants)?
Who can access your services (look for any access restrictions based on gender, age, disability, ethnicity, religion, legal status, etc.)? Do people have to pay to access your services? What language(s) are available for services? If users need information on the services (e.g., after-care guidance, instructions for taking medicines), which languages and format are offered?
What safeguarding procedures do you have in place?
If you receive a report of another protection issue you cannot deal with directly (e.g., child separation, trafficking, psychosocial support), to what services do you refer people? Do you have specific contacts or focal points in those services? How often do you update your contacts?
If we hear of any positive or negative experiences or suggestions about your service, how do we pass them on to you?
Have emergencies or disasters ever disrupted your services? [mention any specific examples if possible.] If yes, wer you able to overcome these problems? Did the challenges affect how you provided services, particularly to vulnerable groups (specifically women and girls, older persons or persons with disabilities)?

#### Tool 2: How to map formal/informal protection services and structures in disasteraffected communities

Adapted from: Protection Mainstreaming Working Group. *Protection Mainstreaming Facilitation Guide*. 2018, and Catholic Relief Services. *Community Led Disaster Risk Management+ Guidance*. 2022.

#### Step 1: Preparing the exercise

Work out the location covered by the mapping (e.g., a rural community, village or camp).

#### Step 2: Introducing the exercise and discussion

#### Welcome and introduction

- Welcome participants and invite them to introduce themselves.
- Introduce the facilitator and notetaker, including names, organization and positions.

#### **Explain the process**

In a language participants understand, explain:

- The purpose of the discussion, how the participants were chosen, and how you will use the information that you collect.
- The exercise is to develop a conceptual map, not a physical one. The aim is to discover the formal and informal groups and organizations that exist in and around the community.
- There are no right or wrong answers.
- Participation is voluntary. Participants can refuse to participate or stop at any point, with no consequences. Their answers will not affect whether they receive services.
- You do not expect people to talk about specific incidents of violence. They should never reveal any identifiable personal information—such as the names of survivors or perpetrators.
- The team will take notes and may collect some data about participants but will not share it unless participants agree.
- If anyone has any confidential concerns or complaints, they can share them with the facilitator after the session.
- You can share a consent form a few days before the exercise for children, people with disabilities and other vulnerable groups. Consider explaining the form in person if a written text is difficult for them to understand.
- Help all groups express themselves—including older people, people with disabilities, religious groups, ethnic minorities, people of different genders and speakers of different languages. Consider holding separate mapping exercises for different groups.

#### Clarify terminology

■ Introduce key terms/language so that everyone understands the terms in the same way. You can introduce terms at the beginning of the discussion or gradually as you move from topic to topic. Please see the Glossary (PART 5) for terms used, and make sure that you have found the most suitable translation for each term.

#### Step 3: Conducting the mapping exercise

#### Part A

- Ask participants to think about the following questions:
  - What do you do when you face a protection threat before or during a disaster?
  - Who do you go to for help?
- In the middle of a large sheet of paper or on the ground, draw a large circle with a sick person inside it. Then draw three more circles around the central one. Explain that:
  - The inner circle represents the **survivor**, the person who has been
  - The next circle represents the people closest to that person. They might be the people the survivor turns to first for support or help (e.g., their mother, brother, sister, father or friend).
  - The next circle represents those closer to the survivor. These might be people, groups or organizations the survivor may go to next for support or help (e.g., a teacher, nurse, doctor, priest, community leader, women's group or midwife).
  - The outer layer represents those who are only **close** to the survivor. These are people, groups or organizations in the community that the survivor has a more formal relationship with (e.g., the police, health clinics, lawyers and schools).
- Close Closer Closest Survivoi **MATERIAL ADAPTATION FROM**

CRS SAFE AND DIGNIFIED PROGRAM

- Ask participants to think about specific people for each circle in their local area. For example, would parents, grandparents or siblings be included in the closest ring? Would healthcare providers or education actors be in the close ring?
- Record information about the people, groups or organizations in layers two (closer) and three (close). You can compare it later with the information the protection actors give you in Tools 1 and 2 to see if they overlap or if there are any differences.

#### Part B

- Draw a line down the middle of each circle to divide them into two halves. Explain that the left half refers to "pre-disaster" and the right half refers to "post-disaster."
- Ask participants to place the actors they identified in part A inside the circle and decide if they play a key role "pre-disaster," "post-disaster event," or both.

#### Step 4: Concluding the discussion and following up

- Go back over everything that participants shared and ask if anything is missing.
- Photograph or record the output of the session so you can share this information with the people who are developing the referral pathway.
- Give the participants contact information in case they want to share anything else with the facilitation team.
- Thank participants for their time and ideas.
- Inform the relevant person (e.g., your protection focal point) of any sensitive issues or complaints that were raised and offer contact information.

#### Tool 3: Referral card template

NOTE: This list is not exhaustive. Please expand and adjust according to context.

#### **Referral of Protection Cases**

#### Use if you are informed of a protection incident (violation of rights, gender-based violence, etc.)

- 1. Provide a safe and caring environment for the survivor and respect his/her wishes and the principle of confidentiality.
- 2. Ask what are his/her immediate needs.
- 3. Provide clear and honest information about available services.

#### NO REFERRAL WITHOUT explicit consent, except:

- 1. When there is a threat to the life of the survivor
- 2. When a survivor threatens to cause serious harm to another person
- 3. In case of suspicion of abuse or neglect towards a child and in child's best interest

In the event of rape, inform the victim of the importance of accessing medical care within 72 hours.

If the survivor agrees and requests, ask for his/her informed consent and carry out referrals and support for accesssing services.



If the survivor has given <b>consent</b> , the <b>immediate response</b> should be:						
Sexual violence	Physical violence	Safety risk	Psychological violence			
1		Į.	<b>↓</b>			
Prioritize health care		Prioritize safety	Psychosocial support			
1						
Hospital or Healthc	are NGO	Police	Counselling/Mental health care			

#### What services are available?

#### ORGANIZATION

Opening hours:

Point focal: Name, contact details (phone/email)

#### Services provided: Target group:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### MHPSS

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### Health/Nutrition

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### Protection and Legal assistance/advice

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### Education

#### **ORGANIZATION**

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### WASH

#### ORGANIZATION

Point focal: Name, contact details (phone/email) Services provided:

Target group: Opening hours:

Languages services provided in:

#### ORGANIZATION

Point focal: Name, contact details (phone/email)

Services provided: Target group: Opening hours:

Languages services provided in:

#### Tool 4: Referral pathway checklist

Adapted from: Trócaire. *Humanitarian Protection Handbook*. 2014.

CHEC	KLIST	YES/NO
1	Is there an existing referral pathway? Was it developed by the government or Protection Cluster (or Sub-Cluster)?	
2	Are existing referral pathways reliable and responsive during emergencies?	
3	Is it easy for community members to access and understand information about the referral pathways?  • Are different communication channels used to share this information?  • Which languages are used to share this information?	
4	Are there referral pathways set up in evacuation centers, temporary shelters or isolation facilities?	
5	Do local disaster risk reduction and management offices use a standard referral pathway for disaster victims?	
6	If there are no referral pathways, have you done a mapping to find all the key actors who offer services or who have influence over a particular protection problem?	
7	Does the referral process ensure informed consent (i.e., clear and full permission from survivors) and a survivor-centered approach?  • Do survivors fully understand what they are agreeing to, including what options they have and any risks?  • Do survivors' needs and preferences take priority? Does the survivor take part in decisions that affect them? Are they treated with respect and dignity?	
8	Have you ensured that everyone in the organization (from drivers to the head of office) understands when and how to orient people to these services? Does everyone understand organizational limits, including what cases the organization can and cannot get involved in?	
9	Do you make sure that staff members know they should never share sensitive information with anyone who is not directly involved in a survivor's care unless they have the survivor's permission?	
10	Does your referral process ensure that your organization shares information with specialist organizations so they can take further action?	
11	Are you giving communities enough information about where they can access other agencies directly?  • Which languages and communication channels do you offer?	
12	Are you considering survivors' culture, age, ability, language and gender?  • Does all communication happen in a safe place?  • Are survivors' rights to make their own decisions respected?	
13	Are you following existing standard operating procedures at all times?	

#### Further resources

**IASC.** April 6, 2020. *Identifying and Mitigating Gender-based Violence Risks within the COVID-19 Response*.

**Gender Based Violence AOR, Global Protection Cluster**. 2020. <u>Rapid Assessment Remote Service Mapping Template</u> (COVID-19).

**IASC**. 2015. How to support survivors of gender-based violence when a GBV actor is not available in your area: A step-by-step pocket quide for humanitarian practitioners.

IFRC. 2020. Hotline in a Box. IFRC.

**CRS**. 2021. <u>Strengthening Partners in Protection Against Sexual Exploitation and Abuse—A Toolkit for Local and National Organizations.</u>

## Part 2: 2.4 Code of Conduct Toolkit

#### Introduction

Staff conduct is central to all that an organization does. This is especially true for local disaster risk reduction (DRR) and humanitarian actors who directly engage with communities during all phases of disaster planning and response. A Code of Conduct (CoC) serves two primary purposes: it protects the people that the organization serves as well as the reputation of the organization and its staff members. It is important that CoCs are locally owned, codified, adapted to the context, and that communities are aware of expected staff behavior.

In this document, "staff" refers to anyone with a contractual relationship with an organization that gives assistance and services to communities—including employees, volunteers, contractors, partners or any other affiliates.

#### What is the purpose of this tool?

The following tools are designed to support local DRR and humanitarian actors to develop/adapt their CoC and to share the content of that code with local communities in an understandable and accessible way. This toolkit contains the following tools:

Tool 1: Minimum CoC content checklist

Tool 2: Example CoC template

<u>Tool 3:</u> Key messages for adults and children on safeguarding and Protection against Sexual Exploitation and Abuse (PSEA)

Tool 4: Information-sharing plan for communities on safeguarding and PSEA

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

#### When to use this tool?

These tools can be used to develop or revise a CoC. DRR and humanitarian organizations should not work with communities until a CoC that meets these standards is in place and signed by all staff.

#### How to use this tool?

Developing or revising a CoC is an intensive process. The following are recommendations for this process:

- **Consultative process:** Ensure that diverse staff and community members are involved in sharing ideas and input into developing a CoC.
- Senior leadership: Ensure senior leadership is involved and committed to continual support in the CoC development process.
- All forms of conduct: Identify other forms of conduct beyond forms of exploitation and abuse that are not allowed. For example, alcohol and substance abuse, use of organizational resources, safety of staff and information technology (IT) equipment use should be considered.
- National labor laws and human resources standards: Review human resources (HR) standards and national laws related to different disciplinary actions that apply if a CoC is breached. Make sure the CoC is in line with national labor laws.
- **Application of code for all affiliates:** Include the CoC in all contracts and relationships an organization enters into—including with vendors, contractors, volunteers and partners.
- Strategy for dissemination and training staff: Develop and implement a strategy for the dissemination/training on the CoC for all current and future staff at all levels.

■ **Regular review:** Plan for periodic review of the CoC (e.g., every 2 years) to ensure it matches the work context. Any updates made to global standards can be incorporated. These include the Inter-Agency Standing Committee (IASC) Six Core Principles Relating to Sexual Exploitation and Abuse (i.e., "IASC Six Rules" toolkit). 45

#### Who to involve?

The process should involve all levels of an organization—including senior leadership, program teams, HR and operations staff.

#### **Key definitions**

**Abuse:** When a person purposely hurts another person who they over-power. Abuse can be physical, emotional or sexual.

**Physical abuse:** When someone uses physical force that causes harm or suffering to another. Examples include hitting, shaking, kicking, pushing, grabbing and other physical acts.

**Emotional abuse:** When someone harms a person's emotional state and negatively affects their behavior. Examples include degrading punishment, threats or bullying.

**Sexual abuse:** When someone forces or threatens someone with sexual contact because they are stronger or have more power. Examples include using inappropriate touching, sending unwanted sexual messages or rape.

**Discrimination:** When a person or group of people are unfairly treated differently from other people or groups based on characteristics—such as gender, race, age, religion, disability or other categories.

**Exploitation:** When someone trusted or with power over others takes advantage of their position to control others or achieve their consent. Examples include child labor, trafficking and sexual exploitation.

**Sexual exploitation:** Abusing a person's vulnerability, unequal power or trust for sexual purposes. This can include profiting in any way from another person being sexually exploited. Examples include exchanging goods or services for sex

**Harassment:** Harassment is behavior in the workplace that is unwanted/uninvited, threatening/offensive and creates a hostile environment. Examples include requests of a sexual nature, unwanted touching or sharing sexual or offensive images.

**Sexual Harassment:** Any unwelcome words, actions or any other behavior that is sexual between people in a workplace. This includes abusive or derogatory words, jokes or comments towards another staff member, or offensive messages or photos shared in the workplace.

**Zero tolerance:** No tolerance for inaction when allegations of sexual exploitation, abuse and harassment are received.

<sup>45</sup> IASC Six Core Principles Relating to Sexual Exploitation and Abuse | IASC / PSEA (interagencystandingcommittee.org).

Tool 1: Minimum Code of Conduct content checklist for DRR and humanitarian actors<sup>46</sup>

OVERVIEW		
Purpose  This tool outlines the minimum content for a CoC. It covers various areas, incomplete behaviors that are not allowed and reporting. DRR and local humanitarian and adapt this content based on the local context and existing ethical codes. All of minimum, should contain the IASC Six Rules.		
When to use it?  Before or during the development or revision of a CoC. Organizations showith communities until a CoC that meets these standards is in place and staff.		
How to use it?	This checklist can be adapted based on the context and each actor's existing ethica codes and guiding principles. The content can be used to develop or revise a CoC use the (CoC Template, Tool 2).	
Who to involve?	Senior management, programs teams/field staff, HR and operations staff should be involved.	

#### Content

#### Is the purpose and scope of the CoC defined? Is it clearly stated that the code applies to all staff at all times?

- The purpose of the CoC is to set clear expectations about the duty to treat all people with respect and prevent all forms of abuse and exploitation.
- This CoC applies to all staff. Anyone who works for the organization as an employee or on another basis (such as a volunteer or contractor) is considered a staff member and must adhere to this CoC.
- The Code is always applicable and mandatory. This includes when staff are at work, outside of work and while on leave.
- Zero tolerance: Breaches of the CoC are grounds for disciplinary action, up to and including dismissal.

## Are existing professional ethical codes and prohibited behaviors defined? This includes all forms of exploitation, abuse, harassment and discrimination against both community members and other staff members.

- Our organization's values and guiding principles: [insert values and principles key to the organization—such as integrity, respect or accountability].
- Prohibited staff behavior against other staff and against community members: [insert prohibited staff behaviors].
  This should cover all forms of:
  - Exploitation
  - Abuse
  - Harassment
  - Discrimination
- Staff must respect the dignity of all people, particularly community members in the organization's work. All staff must conduct themselves with integrity and respect.
- Discrimination, harassment, exploitation and abuse of any form are NEVER acceptable under any circumstances and are grounds for disciplinary action—including dismissal.

#### Are all IASC Six Rules included under prohibited behaviors?

- Sexual exploitation and abuse by staff represent serious misconduct and are grounds for dismissal.
- Staff are not allowed to engage in any form of sexual misconduct, abuse or exploitation of community members, including:
  - Touching anyone in a sexual or inappropriate manner
  - Making inappropriate or sexualized comments
  - Taking or sharing pornographic pictures

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<sup>&</sup>lt;sup>46</sup> Adapted from CRS, Partner Safeguarding Project Code of Conduct Template (2022); CRS Code of Conduct checklist in the CRS SPSEA Toolkit, (2021); International Committee of the Red Cross, Code of Conduct (2018).

- Improperly using your position and power as a DRR or humanitarian organization or local government in a relationship with people who need assistance
- Staff are prohibited from exchanging money, employment, goods or services for sex—including sexual favors. This includes:
  - Purchasing sex
  - Exchange of assistance or services due to community members
    - Having sexual relations with a child (anyone under 18 years of age) is prohibited regardless of the local age
      of consent. Mistaken belief regarding the age of a child is not an excuse.
    - If a staff member has concerns or suspicions about sexual abuse or exploitation by a fellow staff member, whether in the same organization or not, he/she must report these concerns.
    - Organizations must create an environment that prevents sexual exploitation and abuse and promotes adherence to the CoC.

## Is information about reporting complaints outlined—including the duty of staff to report concerns as well as how to report them?

- Staff *must immediately report* any concerns or suspicions they witness, are made aware of, or are subject to which appear to breach the CoC. Any concern, however minor, must be reported.
- Staff receiving reports or concerns must act or refer the concern immediately as per the organization's policies and procedures:
  - Complaints reporting information: [insert a summary of how complaints are reported]
  - Complaints reporting email: [insert the reporting email sample@xxxx.org]
  - Complaints reporting hotline: [insert the hotline number]
  - Staff can also make a complaint in person, by letter or by phone to one of the people listed: direct manager, administration manager, HR manager, director [delete/insert as necessary]
- All complaints will be received, processed/stored safely and kept confidential.

## Is there a statement to show the staff member has read and understood the CoC, including an understanding of disciplinary action up to dismissal for any breaches of the Code?

- I acknowledge that I have read and understood the CoC and commit to upholding the behavioral conduct.
- I understand that failure to comply with the CoC or to report concerns of abuse and exploitation will result in disciplinary action and may result in termination of my contract.
- I understand I have a duty to report immediately if I see or suspect misconduct, if an allegation of misconduct is made against me or if another staff or program participant discloses misconduct to me.
- Signature line with date and location.

Other comments:

Tool 2: Example of Code of Conduct template

OVERVIEW	
Purpose This tool gives an example template with various sections that a sim cover.	
When to use?	It should be used during the development of a CoC in a consultative process.
How to use? The Checklist ( <u>Tool 1</u> ) can be used to help actors develop and adapt each section of the CoC ( <u>Tool 2</u> ), which should be based on each accode of ethics and guiding principles. The process for developing the be consultative and involve diverse organization members.	
Who to involve?	Senior management, programs teams or field staff, HR and operations staff should be involved.

#### **Example Code of Conduct**

#### Introduction: purpose and scope of the CoC

In line with its values, [insert organization] is committed to ethical conduct among all its staff and to provide a safe environment for all staff and community members free from discrimination, abuse and harassment.

The purpose of the CoC is to set clear expectations about the duty to treat all people with respect and prevent all forms of abuse and exploitation.

These policies apply to all staff, including: [insert staff, volunteers, contractors, partners, other affiliates].

The Code is always applicable and mandatory. This includes when staff are at work, outside of work and while on leave. Breaches of the CoC are grounds for appropriate disciplinary action, up to and including dismissal.

#### Organization's values and guiding principles

Our organization is committed to upholding the following values and guiding principles:

[INSERT VALUES AND PRINCIPLES KEY TO THE ORGANIZATION—SUCH AS TREATING ALL PEOPLE WITH DIGNITY AND RESPECT.]

#### Example:

- I will treat all staff and community members with dignity and care
- Prohibited behaviors

staff members:
[INSERT THE PROHIBITED BEHAVIORS TOWARDS PROGRAM PARTICIPANTS, COMMUNITY MEMBERS BENEFITTING FROM ASSISTANCE AND SERVICES AND STAFF MEMBERS THAT COVER DISCRIMINATION, EXPLOITATION, ABUSE AND HARASSMENT.]
Example:
<ul><li>I will not harass other staff members, including sending inappropriate messages or photos.</li></ul>
■ I will not emotionally abuse another child or adult.
Protection against sexual exploitation and abuse
All staff must uphold the following rules:
[INCLUDE THE IASC SIX RULES ON SEXUAL EXPLOITATION AND ABUSE.]
······································
Example:  I will not exchange money, employment, goods or services for sex—including sexual favors, including:
Purchasing sex
Exchange of assistance or services due to program participants
[INSERT OTHER AREAS THAT MAY NOT BE INCLUDED IN THE ABOVE, SUCH AS USE OF ORGANIZATIONAL RESOURCES; FRAUD, BRIBERY, AND CORRUPTION; CONFIDENTIALITY AND DATA PROTECTION; POLITICAL ACTIVITY; SAFETY AND SECURITY.]
Example:
.  I will not use any organizational funds for personal gain.

The following behaviors are prohibited by all staff towards program participants, community members and other

[INCLUDE INFORMATION ON STAFF OBLIGATION TO REPORT AND HOW TO REPORT ANY COMPLAINTS.]
Mandatary reporting
Mandatory reporting Example:
<ul><li>Staff receiving reports or concerns are obliged to act or refer the concern immediately as per the following</li></ul>
procedures:
<ul> <li>Complaints reporting information: [insert a summary of how complaints are reported].</li> </ul>
[INCLUDE STATEMENTS ACKNOWLEDGING THAT STAFF HAVE READ AND UNDERSTOOD THE CODE.]
Declaration: receipt and acknowledgment
Example:
■ I acknowledge that I have read and understood the CoC and commit to upholding the behavioral conduct
Signature:
Data
Date:
Location:

Tool 3: Example of key messages for adults and children on safeguarding and PSEA

OVERVIEW	
Purpose	Safeguarding and PSEA are complicated and sensitive topics. This tool summarizes key safeguarding and PSEA messages that DRR and local humanitarian actors can share with program participants and community members. It also aims to simplify key messages and make them more accessible.
When to use?	Use at the start of the program or service, to develop communication materials for communities and/or brief new staff members.
How to use?	The content can be adapted to the context. It should be translated into local languages/dialects.
Who to involve?	Program teams/field staff and HR staff should be involved.

#### **Adults**

#### Your rights

Do you get assistance or other services from organizations and local governments? If so, you should know:

- Emergency assistance and services are always free.
- The types of assistance and services you get are based on your needs.
- No one should use their power to control you or your community.
- If any services are not free, the government or organization should clearly say the reason why and the amount of the fees.
- It is never okay if people working for organizations or local governments abuse their power, harm you or treat you inappropriately. For example, no one should ever ask you for favors in exchange for assistance or services.

#### Your right to information

- You have the right to be told about the assistance and services available to you.
- You have the right to know how people are chosen to get assistance or services (this is called "selection criteria").
- You have the right to ask questions and raise concerns about the assistance or services you get. Raising any concerns will not affect your right to assistance and services.

#### You have the right to be safe and to be respected

The people giving assistance and services who work for organizations and local governments should:

- Always treat you with respect and dignity
- Always keep you safe from harm
- Never ask you for any kind of sexual favor in exchange for assistance or services
- Never harm, hurt or abuse you
- Never have any sexual contact or relationships with you, other people getting assistance or services or with anyone under 18 years of age

If any of these rules are broken, please report this to someone. This will help keep you and other people safe.

#### Has a person who gave assistance harmed, hurt or abused you or someone else?

If anyone hurts or harms you, it is never your fault. It is the responsibility of organizations and local governments to keep you safe and treat you with respect and dignity.

- You have the right to make a complaint and report this person in a safe and private way. Your safety is the priority. All complaints are kept confidential and private.
- You have the right to get a response to your complaint or concern.
- Do you want to make a complaint about a person giving you assistance or services who works for an organization or local government? If so, report it to [insert reporting mechanisms].

It is important to make a complaint. You may be the only person to speak up. You may be the only person to help yourself or others.

#### Do you need support after being harmed, hurt or abused?

- It is important to get support. You can contact [insert name of organization or local government]. There you can get more information about people who can support you.
- Seek medical attention immediately if you experience sexual abuse. You deserve care and support.

#### Children

- Assistance is always free. No one has the right to ask you for anything in exchange for the services that organizations and local governments are giving you. This includes food, water, schoolbooks, games—everything. Please tell your friends.
- Staff working for organizations and local government should make you feel happy and safe. They should always treat you with kindness and respect.
- Staff working for organizations and local governments should never hurt you, shout at you, touch you somewhere you do not like, make you feel sad or ask you to keep something a secret.
- We will always listen. Tell us if someone who works with us or any organization or local government hurts you, makes you feel sad or bad or touches you in a way that you do not like. Do not blame yourself. It is not your fault. Tell us and we will help you. Keeping you safe is what matters the most to us. Tell your friends.

Tool 4: Information-sharing plan for communities on safeguarding and PSEA<sup>47</sup>

OVERVIEW	
Purpose	Because safeguarding and PSEA are sensitive topics, Key Messages on Safeguarding and PSEA (Tool 3) must be shared in different formats so that they reach different groups. This tool enables DRR and local humanitarian actors to systematically plan what information should be shared, with who, and how, etc., so that appropriate mechanisms/formats are used.
When to use? Use before or at the start of the program or service.	
How to use it?	Go through each section, giving particular attention to more marginalized groups—including women, children, older people and people with disabilities.
Who to involve	Program teams or field staff should be involved.

ACTIVITY/PROGR	ACTIVITY/PROGRAM/SERVICE				
WHAT information is to be shared?	WHO are you trying to reach with this information?	HOW will you reach different groups? What mechanism will be used?	WHERE will you be sharing the information?	WHEN will you share the information with different groups in each area?	
Information about staff	Women and men	Community meeting	Community X and Y	Daily from Mon 1st–5th	
conduct and how to report	Older men and women	Church announcements	Community X	Daily from Mon 1st–5th	
	Older men and women	Mosque Announcements	Community Y	Daily from Mon 1st–5th	
	Persons with disabilities and specific minority or ethnic groups	Door-to-door	Community X and Y	Daily from Mon 1st–5th	
	Children (girls and boys)	Schools (posters; information, education and communication [IEC] materials)	Schools A, B and C	Daily from Mon 1st–5th	
Targeting information	Children (girls and boys)	School groups (posters, IEC materials)	Schools A, B and C	Weekly for 1 month	
	Boys and men	Sessions with men and boys	Market X and Y	Weekly for 1 month	
	Women	Face-to-face at water points	Water point X, Y, Z	Weekly for 1 month	
	Adult men and women	Radio messages	District X and Y	Weekly for 1 month	

 $<sup>^{\</sup>rm 47}$  Adapted from Information sharing template (Caritas Internationalis 2018).

## Part 2: 2.5 Simulation Exercise (SIMEX) Facilitation Guide

#### Purpose of tool

This simulation exercise is designed for local disaster risk reduction (DRR) and humanitarian actors to test the feedback mechanisms and referral pathways in place as part of a safe and dignified programming approach. The exercise gives participants a space to:

- Practice handling sensitive feedback received through community-based feedback mechanisms.
- Use the referral pathway to orient survivors to available local services.
- Identify challenges and gaps in handling sensitive feedback within their organizations.
- Create action plans for improvement.

The following policies and procedures are needed for effective participation in the exercise:

- Feedback mechanism Standard Operating Procedures (SOPs)
- Referral pathway documents

#### **Participants**

#### Simulation exercise management team (SIMEX team)

This should have three or more people, including:

- Simulation team leader (SIMEX leader) responsible for the overall planning, implementation and evaluation of the exercise.
- **Observers** (one observer for each participating organization) will observe a group and give feedback at the end of the simulation. During the simulation exercise (Session 3), observers can clarify instructions, but they should not help the organizations develop their responses. The observers should be familiar with the feedback mechanism SOPs and referral pathways of the participating organizations.

#### Staff from participating organizations (participants/organizations)

Each participating DRR or humanitarian organization should have at least three people represented in the simulation, including:

- Director or senior leadership
- Program director or senior-level program staff
- Safeguarding focal point or equivalent (if applicable)
- Monitoring and evaluation staff member (if applicable)
- Field-level staff member

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

#### Time

■ 3.5 hours (The session can be shortened depending on how much time the participants have.)

#### **Handouts**

- HO 19: Sample of General Emergency Scenario
- HO 20: Sample of Specific Project Scenario
- HO 21: Sample of Feedback Mechanism for Sensitive Feedback
- HO 22: SIMEX Form

#### Materials

- Pens
- Flipchart (optional)

#### Preparation

- Read through the Feedback Mechanism SOPs and referral pathways of the participating organizations.
- Adapt the general emergency scenario (HO 1) and specific project scenario (HO 2) using appropriate examples from the local context.

#### Outline and methodology

- Session 1: Introduction (30 minutes)
  - SIMEX team leader introduces the session and explains the process to participants.
  - Participants from the same participating organizations are grouped together.
  - Facilitator shares the general scenario (<u>HO 19</u>), project scenario (<u>HO 20</u>) and explains the activity for Session 2.

#### ■ Session 2: Simulation exercise (60 minutes)

- Facilitator shares the sensitive complaint scenario (<u>HO 21</u>) with a member from each participating organization.
- Each organization works together in a team to document the process they would use to respond to the scenario.
- The groups complete the SIMEX Form (HO 22) with their responses.
- One observer sits in each group and takes notes of what is happening.

#### ■ Session 3: Group meetings with SIMEX team (30 minutes)

- The SIMEX team holds meetings with each organization.
- The organizations provide a brief presentation on their process for responding to the complaint.
- Each organization hands in their SIMEX Form (<u>HO 22</u>).

#### ■ Session 4: SIMEX team discussion/break (30 minutes)

- Organizations take a break while the SIMEX team goes through the feedback.
- Final scores for each organization are discussed and completed on a single scorecard to share with the organization.

#### ■ Session 5: Debriefing and action planning (60 minutes)

- Participants reflect on successes and challenges that emerged in the exercise.
- SIMEX team shares back their reflections and observations.
- Organizations create action plans for improvement and present them in plenary.

#### Scoring and action planning

The SIMEX team will evaluate the exercise by giving scores against a set of seven expected outputs and by providing overall feedback and recommendations.

#### Scoring

- The scorecard for the simulation covers seven required outputs (see below).
- Up to three points may be awarded per output depending on how they are rated:
  - 3 = Yes/completely. This means the participants did all the expected action(s) or delivered the expected output(s).
  - 2 = Partially. This means the participants only did some of the expected action(s) or only delivered some of the expected output(s).
  - 1 = No/not at all. This means the participants did not do the expected actions or deliver the expected outputs.
- The highest possible score per organization is 21 points. The lowest is 7 points.
- One scorecard with comments and feedback should be completed for each organization by the SIMEX team.

#### Action planning and reflection

After the exercise session, participants have a debriefing session to reflect on successes and challenges. The SIMEX team leader will then share overall feedback on what the teams did well and what could be improved. Organizations will then create simple action plans for improvement.

#### **Expected outputs**

ASPECT TESTED	EXPECTED OUTPUTS
Handling of sensitive feedback Orienting survivor to further support	The designated staff member receives and acknowledges the feedback provided by the complainant within 24 hours.
	■ The receiver tells the complainant their identity will be protected and that appropriate actions will be taken by the organization.
	The designated staff reports/forwards the feedback to the director or person of authority within 24 hours.
	■ The staff who recorded the feedback keeps the information confidential and reports it only to senior leadership and designated staff.
	The staff/safeguarding focal person gives an update to the complainant within 3 working days or sooner, depending on the seriousness of the situation.
	Clear and accurate information is used from the referral pathway to orient the survivor to available local services (such as health, psychosocial support, legal services).
	■ The wishes, needs and confidentiality of the survivor are respected.

#### **METHODS**

#### **CONTENTS**

#### **SESSION 1: INTRODUCTION, 30 MINUTES**

#### Presentation

#### **Process**

- Welcome the participants and share the simulation objectives.
- Make sure all participating organizations have copies of their feedback mechanism SOP and referral pathway document with them.
- Review the tools and processes that will be tested (the feedback mechanism SOPs, referral pathway).
- Introduce the SIMEX management team (SIMEX team leader and observers).
- Share the background on the simulation scenarios.
- Share the sample general emergency scenario (<u>HO 19</u>), and give participants time to read through it.
- Share the sample specific project scenario (HO 20) and give participants time to read through it.
- Share the instructions for Session 2 (simulation exercise):
  - Each organization will work as a team, using their feedback mechanism SOP and referral pathway card.
  - A sample sensitive complaint (<u>HO 21</u>) will be given to one member of each team, received through their feedback mechanism.
  - Each organization uses the SIMEX form (<u>HO 22</u>) to explain their process for managing the complaint, including the:
  - Roles and responsibilities for each person involved in managing the complaint
  - Timeline for responding to the complaint
  - Process for managing the complaint and ensuring survivor/victim support
  - One observer should sit with each team and note feedback on their process.
  - They should treat the exercise like a real situation.
- Allow time for questions.

#### **SESSION 2: SIMULATION EXERCISE, 60 MINUTES**

#### **Group exercise**

#### **Process**

- Tell the participants they have 1 hour to do the exercise and any technical aspects of the session.
- Give the sample sensitive complaint to one member of each organization (HO 21). Give the organizations 1 hour to work in groups and document the process.
- One observer per organization sits with the group and writes any observations on the scorecard. They should focus on any strengths and areas for improvement.
- Observers can clarify instructions but **should not help** the organizations document their process for managing the complaint.

#### **SESSION 3: GROUP MEETINGS, 30 MINUTES**

#### Individual group meetings with SIMEX team

#### **Process**

- The SIMEX team (observers and team leader) hold separate meetings with each organization. Each organization briefly presents their process for responding to the complaint. *NOTE:* these presentations should not take place in plenary but in individual meetings with the SIMEX team.
- After presenting to the SIMEX team, each organization hands in their SIMEX Form (HO
   22).
- The SIMEX team ask questions and note down any comments and suggestions.

#### **METHODS**

#### **CONTENTS**

#### **SESSION 4: SIMEX TEAM DISCUSSION/BREAK, 30 MINUTES**

### SIMEX team discussion

#### Process

- Participants take a break while the SIMEX team meet to discuss the outputs.
- The scores for each participating organization are discussed and completed on a single scorecard to share with the organization.
- The SIMEX team notes down any overall feedback and trends to share in the plenary discussion, focusing on:
  - What organizations did well
  - What organizations could improve

#### **SESSION 5: DEBRIEFING AND ACTION PLANNING, 60 MINUTES**

## Discussion and group work

#### **Process**

- In plenary, invite the participants to say how they felt about what happened during the exercise. Allow time for discussion (10 minutes). Brainstorm on the following:
  - What worked well?
  - What were the key challenges?
  - What did they feel most confident about?
  - What did they feel least confident about?
- Share overall feedback from the SIMEX team, noting:
  - What organizations did well
  - What organization could improve
- Ask the organization to gather back into their groups with their observer. They should brainstorm some action points for their identified gaps/challenges (20 minutes).
  Observers should help the organizations clarify and agree the action points.
- Ask each group to present their key action points in plenary.

#### **Key messages**

- It is important to have safe and confidential processes when handling sensitive reports.
- The immediate escalation of sensitive feedback to the director/senior leadership is critical.
- Senior leadership has a particular role and responsibility in making sure these processes are in place and known to all staff.
- Survivors need to understand/be aware of the local support available through referral pathways.

#### **Handouts and Training Tools**

#### HO 19: Sample of General Emergency Scenario

#### **HANDOUT 19. SAMPLE OF GENERAL EMERGENCY SCENARIO**

#### Flooding in [insert location] causes massive loss of lives, properties and livelihoods.

Following 3 days of torrential rainfall, [insert location] experienced severe flooding along river banks on July 15. This led to widespread damage and loss in the [insert district names] districts. According to the local Red Cross and Ugandan Ministry of Health, there have been 98 deaths, 230 injuries and the destruction of 1,943 homes. Continued rainfall has led to increasing river levels and additional damage as three landslides occurred in the neighboring district.

The flooding caused damage to homes, roadways, bridges and fields, destroying household and livelihood assets as heavy water washed them away and crops were destroyed by flood waters. Many homes collapsed under the pressure of the high water-levels, leaving people homeless. Waters continue to rise, posing an increased risk of landslides.

An estimated 2,250 persons have relocated to three evacuation centers in schools and government buildings run by the local Red Cross. Local government and non-governmental organizations (NGOs) have provided resources—including food, sleeping items and used clothes for families staying in evacuation centers. However, many of the evacuation centers still need this type of support.

The government is indicating that some families will not be allowed to return to areas that were destroyed and remain at risk of landslides. These families will need extended assistance in evacuation centers.

Lack of water and conditions in the evacuation centers are leading to hygiene and sanitation problems. Evacuees report limited access to bath soap, laundry, sanitary napkins and other non-food items (NFIs). The number of toilets is insufficient and generally not functional due to the lack of water. Evacuees report having to defecate outdoors.

[Insert NGO] has started to deliver daily water trucking to evacuation centers while [insert partner NGO] distributed 1,500 water and hygiene kits to evacuation centers.

#### Resources

Your organization received United States dollars (USDs) \$200,000 from the central government for the provision of relief to the affected area. You can use the funding to support immediate needs in the evacuation centers.

#### HO 20: Sample of Specific Project Scenario

#### HANDOUT 20. SAMPLE OF SPECIFIC PROJECT SCENARIO

#### Scenario

It is still not possible for evacuees to return to their homes due to the impact of flooding on their communities and the high risk of landslides with continued rainfall. Families with damaged houses in communities affected by flooding and landslides have been advised to remain in the evacuation centers. Your organization will support center management for 2–3 months with non-food item (NFI) distribution—including hygiene items, clothing and bedding.

Your organization will ensure distribution in two evacuation centers targeting approximately 750 persons in each. Weekly distributions will be scheduled in coordination with the center management. Twenty staff members and volunteers are being hired and they will have direct contracts with your organization.

Based on the community consultations in the centers, your organization has set up a feedback mechanism that is able to receive both sensitive and non-sensitive feedback.

#### HO 21: Sample of Feedback Mechanism Sensitive Complaint

#### HANDOUT 21. SAMPLE OF FEEDBACK MECHANISM SENSITIVE COMPLAINT

#### **Background**

The feedback below was received four weeks after the project started. In every case, you need to process this feedback, including the acknowledgment to the person giving the feedback.

#### Feedback received through the project feedback mechanism

"During the distribution last week one of your colleagues told me I can get extra hygiene items if I share my phone number with him. I thought it was okay because I have a big family. Then he touched me in a strange way when he was handing over the items. This made me feel very stressed and upset. He also told two of my friends that he will visit them at night. He took their phone numbers. My friend said that he touched her. This made her very unhappy. Since then, I haven't slept properly because I am always thinking about this. I didn't give him my phone number because I was very upset."

## HO 22: SIMEX Form HANDOUT 22. SIMEX FORM

HANDOUT 22. SIMEX FORM
Organization:
TASK In your teams, please show how sensitive feedback would be received and managed according to your feedback
mechanism Standard Operating Procedures (SOPs) and referral pathway. On the form below or on flip-chart paper, please write the roles and responsibilities, timeline and process that will be used to receive and manage the feedback.
ROLES AND RESPONSIBILITIES  Explain who will be responsible for what actions to respond to the complaint.
TIMELINE
Explain when each action will take place.

#### **PROCESS**

Explain the process that will be used to manage the complaint and give support to the survivor.

## PART 3: AWARENESS-RAISING ON RIGHTS AND ENTITLEMENTS

#### Summary

**Part 3** has tools to raise awareness on rights and entitlements with diverse community members. The tools are designed for local disaster risk reduction (DRR) and humanitarian actors to use in communities. It includes training materials to raise awareness on rights and entitlements. It also includes materials to support community Safeguarding Agents.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

#### List of the Tools

List of the Tools			
Introduction to tools to raise awareness on rights and entitlements with communities		Overview Lessons learned	
3.1: Awareness session on rights and entitlements facilitation pack	To increase the knowledge and capacity of local communities on their rights and entitlements	Training facilitation guide, PowerPoint and handouts	This short 2-hour training session introduces community members to their rights and entitlements, including the behavior they can expect from DRR and humanitarian actors. It also includes the impact of safeguarding issues on survivors and the services available to help those who have experienced harm, abuse or exploitation.
3.2: Safeguarding Agent Terms of Reference (ToR)	To help local DRR and humanitarian actors identify and select community Safeguarding Agents	Tool with the role and responsibilities of community Safeguarding Agents	This tool includes selection criteria for community Safeguarding Agents. It also lists their roles and responsibilities and the activities they should deliver.
3.3: Safeguarding Agent training pack	To increase the knowledge and capacity of community Safeguarding Agents	Training facilitation guide, PowerPoint and handouts	This 2-day training should be used to develop community Safeguarding Agent's understanding and capacity. Safeguarding Agents are the first point of contact for community members who experience safeguarding issues during a disaster. This training gives them the basic information on what safeguarding means, the impact on survivors and their expected role.

#### Lessons from using the tools

A lack of community awareness on rights and entitlements—including staff conduct—was identified as a challenge in the needs assessment before the project started. For example, protection and DRR actors explained that people fail to report when they have been harmed because many are still confused about their rights under the law. The project developed key messages around rights and entitlements for communities that were translated into local

languages. A 2-hour community awareness-raising session was developed to highlight those rights and entitlements and explained how people can report complaints and get help. It is vital to use clear, simple and locally translated language when doing this work. Safe and dignified programming approaches often contain technical "jargon" and can touch on sensitive issues. Additionally, many of the concepts being introduced were new to DRR and local humanitarian actors. Project staff highlighted the importance of translating those key messages into local languages, conducting plain language editing and sharing messages through a variety of channels and communication tools. This can help make the concepts more understandable, accessible and relatable to local communities. Of particular importance were key messages for communities on rights and entitlements—including expected conduct of DRR and local humanitarian actors and safeguarding themes—which were developed into a set of simple, straightforward and culturally sensitive messages.

#### **Examples from pilot countries**

In the **Philippines** the *Preparing for Enhanced Protection in Disasters (PrEPD)* project team used the community Safeguarding Agent model to great effect. Barangays (districts) lacked a focal point responsible for receiving and referring allegations of harm, abuse or exploitation. Reporting channels at the local government level were limited, responses to allegations of safeguarding incidents were uncoordinated and communities were largely unaware of safeguarding concepts and their rights and entitlements.

The project team recruited 20 community volunteers across ten barangays (one male and one female Safeguarding Agent per barangay). They received training on safeguarding concepts (rights and entitlements, shock-responsive referral pathways, reporting mechanisms) and signed the Terms of Reference outlining their responsibilities. This was followed by mentoring from the project team—particularly local partners Caritas Pasig Inc. and Commission on Social Action of Malolos—and a final 1-day refresher training. The Safeguarding Agents will soon deliver safeguarding awareness sessions in their communities.

Some of the volunteers also worked as barangay officials. Initially there were concerns they would not be perceived as neutral; however, their familiarity with local disaster responders/members of barangay Disaster Risk Reduction and Management (DRRM) committees meant the Safeguarding Agent model organically linked in to local DRRM structures. The project team also supported local DRRM committees to review and modify their existing coordination structure by creating "protection teams." They encouraged the committees to include Safeguarding Agents—especially those with no formal affiliations to the barangay—on these teams.

Community Safeguarding Agents serve as a concrete example of the National Disaster Risk Reduction and Management (NDRRM) Plan for local government units (LGUs) (Republic Act 10121) aspiration to recruit and mobilize Community Disaster Volunteers across the Philippines. Longer term, Safeguarding Agents can be accredited as Community Disaster Volunteers through an Office of Civil Defense (OCD) resolution. This would formally acknowledge their role and influence in the barangays. It would also mean the barangays would take full responsibility for the well-being and further capacity-strengthening of Safeguarding Agents.<sup>48</sup>

<sup>&</sup>lt;sup>48</sup> Accreditation of Community Disaster Volunteers.

# Part 3: 3.1 Awareness-Raising on Rights and Entitlements Training Pack

#### **Purpose of Tool**

This training is designed to be an accessible, low-tech session for community members with the aim of increasing their knowledge and capacity on their rights and entitlements. It includes answering these questions:

- What rights do a person have to live with dignity and safety?
- What actions and behaviors are defined as sexual exploitation and abuse (SEA)?
- What actions and behaviors are expected and prohibited by disaster risk reduction (DRR) and humanitarian actors?
- How and where can a person report any issues or concerns related to staff misconduct—including sexual abuse and harassment?
- What services are available to support people who have experienced harm, and how can a person access these services (mapping and referral)?

#### **Participants**

Community members

#### Time

■ 150 minutes

#### Handouts

- HO 23: Key messages on rights and entitlements
- HO 24: IASC Six Rules

#### **Training Tools**

- TT 17: True/False signs
- TT 18: SEA Scenarios
- TT 19: Reporting Scenarios

#### Materials

- 10 vouchers (pieces of paper)
- 8 chairs (or other items)

#### **Training Outline**

- Welcome and introduction (10 minutes)
- Session 1: Overview of rights and entitlements (40 minutes)
- Session 2: Understanding safeguarding and sexual exploitation and abuse (60 minutes)
- Session 3: Reporting and referrals (30 minutes)
- Closing summary and recap (10 minutes)

METHODS	CONTENTS	
Presentation	WELCOME everyone to the session.	
	<b>INTRODUCE</b> yourself (name, organization, position, background, etc.) and the purpose of the session.	
	EMPHASISE that:	
	■ This is a safe space for learning from the experience of others.	
	Everyone is free to share—there are no right or wrong answers.	
	<b>ENCOURAGE</b> everyone to participate and create a comfortable and informal atmosphere by using simple language and avoiding jargon.	
Icebreaker	ASK participants to quickly form groups of 4–5 people. ASK participants to identify five things that all group members have in common (for example, number of siblings, type of job, favorite food, place of birth, etc.). GIVE participants 5 minutes to complete the activity. EMPHASIZE that we are all here to learn together and we all have more in common than we have differences—this is a safe space for everyone.	
Presentation	<b>EXPLAIN</b> the objectives and agenda for the session. <b>EXPLAIN</b> how the session will be conducted: exercises, role plays, discussions and work in groups.	

#### **Session 1: Overview of Rights and Entitlements**

#### Time:

■ 40 minutes

#### Objective:

Participants understand basic information on their rights

#### Key Messages:

- Assistance is free without anything given in exchange.
- Individuals and communities receiving assistance have various rights—including access to basic rights, not to be hurt, to be able to give feedback and complain, etc.

#### Materials:

- Flip chart and markers
- Sticky notes

#### Handout:

■ HO 23: Key messages on rights and entitlements

#### **Training Tool:**

■ TT 17: True/False signs

#### Preparation:

■ Set up True/False signs

#### **SESSIONS 1.1 AND 1.2, 40 MINUTES**

#### Discussion

#### **Purpose**

Participants understand the concepts of safety and dignity

#### **Process**

**ASK** participants what they think of when they hear the words "safety" and "dignity." Use these questions to encourage people to share:

- What do safety and dignity mean to you?
- Can you share a time when you felt like you weren't safe? What made you feel that way?
- Can you share about a time when you felt disrespected? What made you feel this way?

**EXPLAIN** that safety is about being protected from harm. Dignity is about being respected and valued. Every person has certain rights and freedoms—including the right to live in safety and with dignity. Everyone has the right not to be hurt or mistreated. This is important to understand when receiving assistance and services from organizations and/or the government.

**EXPLAIN** that while everyone has the right to live with safety and dignity, not everyone experiences this, especially people who are considered to be vulnerable. It is important to recognize when people are being harmed. It is important to speak up and address the problem. All people from organizations and local governments who give assistance and services to people should respect their dignity and safety without causing them harm.

#### **Debrief**

- All people have the right to live with dignity and safety.
- All people from organizations and local governments giving assistance and services to people should respect their dignity and safety without causing them harm.

#### **Exercise**

#### **Purpose**

Learn about rights and entitlements in the context of service provision

#### **Process**

**PLACE** *true and false signs* (TT 17) in two locations. Ask participants to stand between them. **EXPLAIN** you will read statements about assistance from organizations and local governments. If participants believe the statement is true, they should stand by the true sign. If they believe the statement is false, they should stand by the false sign.

After each statement, **ASK** a participant under each sign to explain why they chose that answer. After a discussion, **SHARE** the correct response.

- Emergency assistance and services given by organizations are free.
  - Answer: TRUE. Assistance and services are free, and no one should be asked for favors
    in exchange. A favor is something given to someone even though they do not owe it to
    them. For example, if someone asks for money or goods or sex for something that
    should be free, they are asking for a favor.
- Information about assistance and services and how people are chosen to get them is private information (how people are chosen is called "selection criteria").
  - Answer: FALSE. People receiving assistance and support have the right to get
    information about services and assistance and to understand the selection criteria for
    them. This is not private information. Anyone can ask about it if the information is not
    shared
- Assistance and services should be based on need.
  - Answer: TRUE. Assistance and services should be based on need. But people have the
    right to services and assistance based on their need without being denied help based on
    their sex, age, religion, etc.
- Abuse of power of any kind over people and communities that causes harm is never OK.
  - **Answer: TRUE.** People should always be treated with dignity. If anyone ever feels uncomfortable or that their dignity or safety are at risk, they have the right to say something and get help to solve the problem.
- If someone working for an organization providing services has asked a person to do something inappropriate, it is best **not** to report it for safety and privacy reasons.
  - Answer: FALSE. Inappropriate behavior should always be reported. The person
    complaining has the right to do this in a safe and confidential way. They also have the
    right to get a response regarding their complaint.
- Organizations and local governments do **not** have to share information on how to report complaints. This is because the information is about their own internal procedures.
  - Answer: FALSE. Everyone has the right to report any inappropriate behavior.
     Organizations and local governments should clearly explain how to report complaints. If this has not been explained clearly, the organization can be asked for this information.

ASK 2–3 participants to share something they learned from this session about their rights.

After discussion, **SUMMARIZE** key points that came up in the activity in plenary. **GIVE** participants the handout on *Key Messages on Rights and Entitlements* (HO 23).

#### **Debrief**

- The types of assistance and services people get are based on their needs.
- No one should use their power to control people or communities.
- People have the right to be told about assistance and services available.
- People have the right to know how people are chosen to get assistance or services (this is called "selection criteria").
- It is never okay if people working for organizations or local governments abuse their power, harm anyone in the community or treat them inappropriately. For example, no one should ever ask for favors in exchange for assistance or services.
- People have the right to report any inappropriate behavior and harm.

#### Session 2: Understanding Sexual Exploitation and Abuse and Safeguarding

#### Time:

■ 60 minutes

#### Objective:

- Participants learn what actions and behaviors constitute safeguarding violations SEA
- Participants learn what is expected and prohibited conduct of DRR and humanitarian actors

#### Key Messages:

- Inappropriate behavior and abuse of power by staff providing services—including asking for favors in exchange for assistance—is never okay.
- Organizations and local governments must have no tolerance for sexual exploitation and abuse and abuse of power.
- If any of these rules are broken, they should be reported. This will help keep people safe.

#### Handout:

■ HO 24: Inter-Agency Standing Committee (IASC) Six Rules

#### **Training Tool:**

■ TT 18: SEA Scenarios

#### Materials:

- Vouchers
- Chairs (or other items)
- Flipchart and markers

#### Preparation:

■ Set up role-play

#### 2.1 STAFF CONDUCT ROLE-PLAY, 30 MINUTES

#### **Exercise**

#### **Purpose**

Participants understand and can identify safeguarding issues

#### **Preparation**

Before the training starts or during a break, choose another facilitator to play the second role in the role-play. Choose five volunteers who will participate in the role-play. Make sure they are clear on the purpose and messages of the scenario.

**PLACE** five chairs at the front of the room or gathering space. *NOTE*: if no chairs are available, use other items (for example, pens, fruit, notebooks, etc.). Prepare ten vouchers (pieces of paper) for the activity.

ASSIGN roles between the facilitators:

- One facilitator oversees the vouchers.
- The other facilitator oversees the chairs (or other items).

#### **Process**

**INVITE** the five volunteer participants to come to the front of the room or facilitation space. ASK the rest of the participants to watch the role-play and reflect on how it relates to the earlier discussion about safety and dignity.

**ASK** the participants to line up and face the audience. This way, the audience can see and hear what the facilitators and participants are saying. SPEAK clearly and loudly and **NARRATE** when needed to make sure that the audience hears and understands what is being said.

#### **ROLE-PLAY** as follows:

#### Facilitator 1:

**TELL** the group of five participants that you can see they have suffered a lot lately. Tell them you are there to help them. You have noticed they have no chairs, but you have vouchers they can use to get them. Tell them they are free to ask questions. Tell them they should come one at a time to get the vouchers. Then, they should trade in their vouchers for chairs.

**ASK** the five participants to come forward and line up. Explain that you have vouchers, which they can turn in to get chairs.

**DEMONSTRATE** inappropriate, disrespectful behavior to each of the five participants (**ENSURE** that the behavior and exchanges are clear for the audience watching and **NARRATE** when needed). Change which behaviors you use and in what order based on the context and participants. The below examples are only a guide and can be adapted. Facilitators do not need to follow the exact script or order.

- **Participant 1**: Give the participant one voucher. Ask for money in exchange for a second voucher. If they agree, tell them you will give them an extra voucher. If they refuse, say that they will not receive another voucher. Tell them not to tell anyone else about the request for money, or you will make sure that they do not get a chair.
- Participant 2: Wink at the participant or demonstrate favoritism (for example, complementing them). Give them two vouchers and ask them to provide their personal phone number, as you would like to call them later and visit them at home that evening.
- Participant 3: Tell the participant that you know their uncle and that he is a good family friend. Give the participant three vouchers.
- Participant 4: Give the participant one voucher. Tell them that they will get two vouchers if they go buy goods for you at the market (give an example of a good based on context). Tell them that this would be your secret and not to tell anyone.
- Participant 5: Tell them that you don't think they should be in the program and that you are running low on vouchers. Refuse to give the participant a voucher, explaining that next time they can get one.

#### 2.1 STAFF CONDUCT ROLE-PLAY, 30 MINUTES

#### ...continued

If any participants ask questions, **DEMONSTRATE** inappropriate behavior (ignore them, speak to them in a different language, turn your back on them, etc.)

Once participants have received vouchers, **EXPLAIN** that they should go to **Facilitator 2** to get their chairs.

#### Facilitator 2:

**ASK** participants to line up to get their chairs one by one.

**ASK** the participants to line up and face the audience. This way, the audience can see and hear what the facilitators and participants are saying. **SPEAK** clearly and loudly and **NARRATE** when needed to make sure that the audience hears and understands what is being said.

**DEMONSTRATE** inappropriate behavior. Change which behaviors you use and the order in which you use them based on the context and participants.

- **Participant 1:** Offer a chair to the participant in exchange for a date. If they refuse, tell them you will not give them a chair. If they agree, tell them you will give them two chairs.
- Participant 2: Tell them that you will only give them the chairs at their home and you will visit them later at their house. Refuse to give them a chair and ask them to tell you where they live.
- Participant 3: Give the participant one chair for the three vouchers and ask them to give you money with their next vouchers to get more chairs. Tell them that if they tell anyone about your request, you will take away their chair.
- Participant 4: Tell the participant that their voucher is only valid if they buy you alcohol. Give them one chair and tell them to come back with the alcohol. Tell them they should not tell anyone about your request.
- **Participant 5** (did not receive a voucher): Tell them to leave the distribution and that there are no more chairs left. Tell them you cannot help them. Ignore them if they ask questions.

**TELL** participants that if they are unhappy because some of them now have one chair, but others have none, they should work it out between themselves and exchange what they have.

After the role-play, ASK participants to return to their seats and DISCUSS in plenary. Use these questions to guide the discussion:

- How did you feel about the behavior of the staff? Thinking about safety and dignity, what behavior was inappropriate? What behavior caused harm?
- Did the staff provide you with free assistance?
- Did the staff ask for anything in exchange?
- Did the staff allow you to ask questions or complain?
- Did the staff provide information about who got a chair and how many you should get?

**EXPLAIN** that abuse of power by staff providing services is always unacceptable.

**EXPLAIN** that safeguarding means protecting community members from harm and the abuse of power by organizations and local governments. The role-play showed many problems with staff behavior and abuse of power (staff were asking for money in exchange for chairs and vouchers, staff asked for other favors, treated community members unfairly, etc.).

#### Debrief

- Inappropriate behavior and abuse of power by staff providing services—including asking for favors in exchange for assistance—is never okay.
- Organizations and local governments must protect community members against the abuse of power and inappropriate behavior by staff.

#### 2.2 UNDERSTANDING SEXUAL EXPLOITATION AND ABUSE, 10 MINUTES

#### Discussion

#### **Purpose**

Participants understand the meaning of sexual exploitation and abuse

#### **Process**

**REMIND** participants that safeguarding means protecting community members from harm and the abuse of power by organizations and local governments. **REMIND** them that the role-play brought up many problems. **EXPLAIN** that one important part of protecting community members from harm is preventing sexual exploitation and abuse.

**ASK** participants what they think of when they hear the phrase "sexual exploitation and abuse."

**EMPHASIZE** that it does not need to be a personal experience. They can share things they have heard.

**TELL** participants not to mention names or identify anyone. **TELL** them that if they are not comfortable, they do not need to share.

Use these questions for discussion:

- What kind of sexual exploitation and abuse is there in your community?
- What are some examples of sexual exploitation and abuse of which you are familiar (if participants don't share, bring up examples—such as organizations' and local government staff asking for sex in exchange for assistance, making inappropriate sexual comments about community members, etc.)?

**EXPLAIN** that sexual abuse refers to physical violation (or attempted violation) that is sexual, by force or in a situation where there is unequal power. Sexual exploitation refers to the abuse of power for sexual purposes (such as asking people to exchange sex in return for something).

**EXPLAIN** that sexual exploitation and abuse happens when organizations and local governments misuse their power and resources against community members.

**ASK** them to remember the role-play and share examples of sexual exploitation (for example, staff asking for favors—such as going on a date or giving personal contact information to visit participants at their homes late in the day, inappropriate behavior that made participants feel uncomfortable or unsafe, etc.).

**EXPLAIN** that sexual exploitation is never okay under any circumstances. **EXPLAIN** that it is the responsibility of organizations to prevent all forms of sexual exploitation and abuse. Sexual exploitation and abuse are never the fault of community members.

#### **Debrief**

- People have the right to always be treated with dignity and respect.
- People have the right to always be free from abuse and harm.
- Sexual exploitation and abuse are against the law and always unacceptable.
- It is the responsibility of organizations and local governments to prevent sexual exploitation and abuse.

#### 2.3 SEXUAL EXPLOITATION AND ABUSE SCENARIO ACTIVITY, 20 MINUTES

#### Group work

#### **Purpose**

Participants can identify examples of sexual exploitation and abuse

#### **Process**

**ASK** participants to think of some ways that sexual exploitation and abuse could be prevented. Use these questions for discussion:

- How can you protect yourself and others against sexual exploitation and abuse?
- What rules should organizations and local governments follow to protect you and others?

**EXPLAIN** that there are important rules that all organizations' and local government workers must follow to protect the safety and dignity of people and communities and to not harm anyone.

**GIVE** participants copies of *IASC Six Rules* (HO 24) *NOTE*: depending on the literacy levels of the audience, it may not be appropriate to provide the copies. In this case, the facilitator verbally explains (see below).

**EXPLAIN** the following rules and **WRITE** the key parts on a flipchart. **EMPHASIZE** that any staff member who breaks one of these rules can be disciplined or even fired.

**SPLIT** the participants into two groups and **CHOOSE** two facilitators. The two facilitators will stand in a different corner of the room/facilitation space.

**GIVE** a copy of the SEA Scenarios (TT 18) to each facilitator.

**ASK** each group to move to one corner with a facilitator. The facilitator will explain the scenarios to the group. For each scenario, the group should decide if the behavior is acceptable or unacceptable (that is, was a rule broken).

Allow ten minutes for groups to discuss the scenarios.

**DISCUSS** the answers. Use the explanations below for each scenario to make things clearer:

- A male government worker comments on a "pretty girl" during a food distribution.
  - Unacceptable (rule broken): Not creating an environment that prevents sexual exploitation and abuse.
  - It could make the young girl feel uncomfortable because the government worker has more power than her, and she doesn't know if he will try to act on his statement.
  - This is degrading and humiliating behavior.
- There are rumors of a staff member adding the name of his girlfriend to the list of people getting food aid.
  - Unacceptable (rule broken): Misusing power.
- A community member in a shelter project is told she must have sex with a project volunteer to get her emergency shelter built.
  - Unacceptable (rule broken): Exchanging goods or services for sexual purposes.
  - Anyone supporting the project—including volunteers—must follow the same rules.
- A male staff meets a 15-year-old female project participant in a bar for a drink and takes her to his house for sexual intercourse.
  - Unacceptable (rule broken): Performing sexual acts with children (anyone under the age of 18, regardless of the local age of consent).
  - A community member receiving assistance.

**DISCUSS** correct responses in plenary, highlighting the ways that the rules were broken.

Following discussion, ASK participants what they should do in all these cases as a next step.

#### 2.3 SEXUAL EXPLOITATION AND ABUSE SCENARIO ACTIVITY, 20 MINUTES

#### ...continued

**HIGHLIGHT** the following:

■ **Reporting is always the first step.** In every case, they should report the incident to the organization or local government that is providing assistance.

#### **Debrief**

The people who work for organizations and local governments giving assistance and services should:

- Always treat people with respect and dignity.
- Always keep people safe from harm.
- Never ask anyone for any kind of sexual favor in exchange for assistance or services.
- Never harm, hurt or abuse people.
- Never have any sexual contact or relationships with anyone getting assistance or services or with anyone under 18 years of age.

If any of these rules are broken, this should be reported to someone in authority. This will help keep people safe.

#### **Session 3: Reporting and Referrals**

#### Time:

■ 30 minutes

#### Objectives:

- Participants understand how and where to report any issues or concerns related to staff misconduct—including sexual abuse
- Participants understand what services are available to support people who have experienced harm and how to access them (mapping and referral)

#### Key messages:

- People have the right to report any inappropriate behavior, exploitation or abuse.
- If people have any concern about the conduct of a staff member working for an organization and local government or have been harmed, this should be reported.

#### Training tool:

■ TT 19: Reporting Scenario

#### Materials:

■ Contact details of local referral pathways (if available)

#### 3.1 HOW TO REPORT AND ACCESS SERVICES, 20 MINUTES

## Discussion and Group Work

#### **Purpose**

Participants understand how to report safeguarding incidents and how to access services [NOTE: this session needs to be adapted based on three factors: 1) the local context, 2) which organizations and local governments are working in the area, and 3) which organizations and local governments are running the session]

#### **Process**

**EXPLAIN** that you will look at two scenarios of abuse by organizations and local governments, and they need to decide what to do next.

**GIVE** the *reporting scenarios* (TT 19) to participants. **READ** it together.

**ASK** participants to split into their groups and discuss the following for three minutes:

■ What would you do next?

**DISCUSS** in plenary, highlighting:

- Reporting is always the first step. Mr. Abel abused his power and asked for money in exchange for assistance, which is always unacceptable.
- People have the right to report.
- Organizations and local governments providing services must give clear information on how to report.
- If an organization or local government does not provide information on how to report, they should be asked for this information.
- Anyone who complains has the right to receive a response from the organization or local government.

**ASK** participants if they know how to report to the specific organization(s) and local government(s) or the organization(s) and local government(s) working in their area.

#### **EXPLAIN** how to report:

- A complaints system has been set up at [name of organization/location]. They can be contacted by [contact details] for further information. All complaints are kept confidential.
- If someone feels that they have been harmed or discriminated against or someone working for a organization(s) and local government(s) has asked them to do something that was inappropriate, please report this using [insert reporting mechanisms].

**ASK** participants to read the second scenario (sexual exploitation and abuse). **READ** it together.

**ASK** participants to split into their two groups and discuss the following for three minutes:

- What would you do next?
- How could you support the female community member?

**DISCUSS** in plenary, highlighting:

- Reporting is always the first step. Remind participants of their right to report and receive information on reporting and that they have the right to get a response to their complaint.
- The person complaining may be the only person speaking out and the only person who can help the survivor and prevent this from happening again.
- In this case, the community member needs to know:
  - What services are available to support people who have experienced harm (for example, a health clinic, an organization to help people who have experienced genderbased violence, etc.).
  - How she can contact these services to get help (for example, a phone number, a point
    of contact, etc.).

#### 3.1 HOW TO REPORT AND ACCESS SERVICES, 20 MINUTES

#### ...continued

**ASK** participants if they are aware of any local services and organizations that support people who have experienced harm so that they can get the support that they need. **DRAW** images of common organizations and local services (hospitals/clinics, police, etc.) on the flipchart as people discuss.

#### **EXPLAIN** how to access services:

- If available, GIVE participants a referral card with available organizations and local government.
- EXPLAIN how community members can contact and access these organizations and local government.

#### **Debrief**

- People have the right to report any inappropriate behavior, exploitation or abuse.
- It is important to report because the person complaining may be the only person speaking out and the only person who can help the victim.
- If anyone has a concern about the conduct of a staff member working for an organization or local government or has been harmed, they should report it using [reporting mechanisms].
- It is important to get support. Help and information is available from [insert name of organization or local government].

#### 3.2 CLOSING SUMMARY AND RECAP, 10 MINUTES

#### Discussion

#### **Recap key messages**

**ASK** participants to turn to the person next to them and share one key message they learned during this training. **ASK** several participants to share in plenary.

**RECAP** the following points:

#### ■ Emergency assistance and services are always free

- If any services are not free, the government or organization should clearly say the reason why and the amount of the fees.
- It is never okay if people working for organizations or local governments abuse their power, harm or treat people inappropriately. For example, no one should ever ask a person for favors in exchange for assistance or services.

#### ■ Information-sharing

- People have the right to be told about available assistance and services.
- People have the right to know how people are chosen to get assistance or services (this
  is called "selection criteria").
- People have the right to ask questions and raise concerns about the assistance or services available. Raising any concerns will not take away their right to assistance and services.

#### ■ Safeguarding and sexual exploitation and abuse

- The people giving assistance and services who work for organizations and local governments should:
- Always treat people with respect and dignity.
- Aways keep people safe from harm.
- Never ask people for any kind of sexual favor in exchange for assistance or services.
- Never harm, hurt or abuse people.
- Never have any sexual contact or relationships with people getting assistance or services or with anyone under 18 years of age.

#### Reporting and referrals

- If anyone is hurt or harmed, it is never their fault. It is the responsibility of organizations and local governments to keep people and communities safe and treat them with respect and dignity.
- People have the right to make a complaint and do this in a safe and private way. All complaints are kept confidential and private.
- It is important to get support. Help and information is available from [insert name of organization or local government].

**THANK** the participants for their active engagement.

#### **Handouts and Training Tools**

#### HO 23: Key Messages on Rights and Entitlements

#### HANDOUT 23. KEY MESSAGES ON RIGHTS AND ENTITLEMENTS

#### Your rights

Do you get assistance or other services from organizations and local governments? If so, you should know the following information.

#### Emergency assistance and services are always free

- The types of assistance and services you get are based on your needs.
- No one should use their power to control you or your community.
- If any services are not free, the government or organization should clearly say the reason why and the amount of the fees.
- It is never okay if people working for organizations or local governments abuse their power, harm you or treat you inappropriately. For example, no one should ever ask you for favors in exchange for assistance or services.

#### Your right to information

- You have the right to be told about the assistance and services available to you.
- You have the right to know how people are chosen to get assistance or services (this is called "selection criteria").
- You have the right to ask questions and raise concerns about the assistance or services you get. Raising any concerns will not affect your right to assistance and services.

#### You have the right to be safe and to be respected

The people giving assistance and services who work for organizations and local governments:

- **Should always** treat you with respect and dignity.
- **Should always** keep you safe from harm.
- **Should never** ask you for any kind of sexual favor in exchange for assistance or services.
- Should never harm, hurt or abuse you.
- **Should never** have any sexual contact or relationships with you, other people getting assistance or services, or with anyone under 18 years of age.

If any of these rules are broken, please report this to someone. This will help keep you and other people safe.

#### Has a person who gave assistance harmed, hurt or abused you or someone else?

- If anyone hurts or harms you, **it is never your fault**. It is the responsibility of organizations and local governments to keep you safe and treat you with respect and dignity.
- You have the right to make a complaint and report this person in a safe and private way. Your safety is the priority! All complaints are kept confidential and private.
- You have the right to get a response to your complaint or concern.
- Do you want to make a complaint about a person who gave you assistance/services and who works for an organization or local government? Report it to [insert reporting mechanisms].
- It is important to make a complaint. You may be the only person to speak up. You may be the only person to help yourself or others.

#### Do you need support after being harmed, hurt or abused?

- It is important to get support. You can contact [insert name of organization or local government]. There you can get more information about people who can support you.
- Seek medical attention immediately if you experience sexual abuse. You deserve care and support.

#### HO 24: IASC Six Rules

#### **HANDOUT 24. IASC SIX RULES**

Adapted from IASC Six Core Principles Plain English Version (2019)

IASC Six Core Principles/IASC/PSEA(interagencystandingcommittee.org

#### Rules on sexual conduct for humanitarian workers:

- Humanitarian workers can be disciplined—even fired—for unacceptable behavior in relation to sex.
- Humanitarian workers are not allowed to have sexual relationships with anyone under the age of 18, even if it is legal in their country. Saying they did not know the person's true age is not a valid excuse.
- Humanitarian workers are not allowed to pay for sex with money, employment, goods or services—including goods and services intended as aid to people in need. They must not use promises of these things to make other people accept any kind of behavior that humiliates or exploits them. This includes paying or offering money for sex with a prostitute.
- Humanitarian workers who might affect who gets goods and services must not have sex with anyone who may get that help. If they do, it destroys trust in the work.
- If a humanitarian worker is worried or suspects that anyone in their organization or another aid organization may be breaking humanitarian rules on sexual conduct, they must report it, following procedures set up by their agency.
- Humanitarian workers must create and maintain a work environment which prevents unacceptable sexual behavior and encourages staff to behave as set out in their codes of conduct. All managers are responsible for supporting and developing systems which maintain this environment.

# True

False

A male team member comments on a "pretty girl" during an earthquake drill.

There are rumors a project staff member added the name of his girlfriend to the list of program participants.

A program participant in your DRR preparedness project is told she must have sexual intercourse with a contracted vender to get her home repaired.

A male volunteer meets a 16-year-old female program participant in a bar for a drink and takes her to his house for sexual intercourse.

Scenario 1: Mr. Abel works for a local NGO and is planning a distribution of items to people affected by flooding. You are a community leader. You are not on the list because you did not lose anything in the flood. Mr. Abel tells you that if you pay him some money [insert local amount], he will add you to the list, and you can also receive a kit. He asks you not to tell anyone about this.

Scenario 2: You are the community focal point for women's affairs, and a female community member approaches you. She tells you that a local government officer named Mr. Hasan made her have sexual intercourse with him in exchange for food aid being distributed. The female community member is very upset.

# Part 3: 3.2 Safeguarding Agent Terms of Reference (ToR)

#### Introduction

This tool aims to help local disaster risk reduction (DRR) and humanitarian actors identify and select community Safeguarding Agents. Community Safeguarding Agents are based in the community and are responsible for community safeguarding. These agents are the first point of contact for community members who report they have been harmed, abused or exploited by a staff member involved in an emergency response.

The community Safeguarding Agent will:

- Serve as a first point of contact for any community members who experience safeguarding issues during an emergency response
- Support the community member through the reporting process
- Contribute to raising awareness on safeguarding, particularly around rights and entitlements for community members, expected and prohibited conduct of staff members working for DRR and humanitarian organizations, and how and where to report complaints
- Gain sufficient awareness of existing referral pathways in the local area and share this information with communities to orient them toward essential services

#### What is the purpose of this tool?

This tool is designed to support the identification and selection of community Safeguarding Agents. It includes selection criteria, roles and responsibilities and activities the agents should deliver.

#### When to use this tool?

The tool can be used before a disaster to identify agents who can receive training and support before a crisis hits.

#### How to use this tool?

The ToR can be adapted to the context; for example, if there is a local title for community/district disaster management committees.

#### Who to involve?

The ToR if for those with the responsibility for identifying and selecting community Safeguarding Agents.

#### **Key definitions**

**Psychological First Aid:** Offering compassion and support to a person who is suffering, focused on listening and linking them to available services and support.

Referral Pathway: A safe way for people to find different kinds of help, like medical care or help from the police.

**Safeguarding:** The responsibility that organizations have to make sure their staff and work do not harm children and adults who are at risk and do not expose them to abuse or exploitation.

**Safeguarding Agent:** A member of the community who is trained to help people with safeguarding issues during an emergency response and support them if they choose to report a problem.

**Sexual Abuse and Exploitation (SEA):** When a person uses a position of power for sexual purposes against a program participant or vulnerable member of the community.

#### Selection criteria

To select people to become Safeguarding Agents, the following criteria should be followed.

#### The person has:

- Taken part in volunteer or advocacy activities in the community that focus on safeguarding and protection
- Been involved in disaster relief operations or activities in the community
- Had roles or positions working to promote human rights and protection against abuse or harassment, etc.
- Has the ability to communicate with and listen to a range of people
- Understands their sphere of influence in the community—including links with local networks and stakeholders
- Belongs to any marginalized or vulnerable sectors in the community
- Contributes to gender balance in the group of selected people
- Has one or more years of experience in the community mobilizing or leading capacity-building sessions (this is not needed but is a bonus)

#### Roles and responsibilities

The community Safeguarding Agent is the focal point for safeguarding issues and concerns in the community, especially in times of crisis or disasters. It is a volunteer role and is based in the community.

The agent is responsible for observing and monitoring safeguarding issues and concerns, especially during emergency responses. Their role is also to assist disaster-vulnerable communities. They help these communities report or refer safeguarding and protection issues—including cases that involve sexual abuse and exploitation—to lead agencies or coordination bodies. Examples include the protection cluster, protection agencies, a government body and task teams for Protection against Sexual Exploitation and Abuse (PSEA).

Some specific duties of the community Safeguarding Agent are:

- Be the first point of contact for any community members who have experienced a safeguarding issue during an emergency response. The Safeguarding Agent also helps these community members report their experience if they ask for help to do that.
- Help raise awareness on safeguarding, especially on rights and entitlements for community members, and expected and prohibited behavior by DRR and humanitarian actors. They also raise awareness on how people can report complaints.
- Learn about referral pathways for different kinds of support and share this information with communities.
- Work with local organizations and local government to make sure community members can easily find and use information about how to make complaints and share concerns and ideas (known as Feedback Mechanisms).
- Help with psychological first aid during and outside emergency or crisis situations.

#### **Deliverables**

Each community Safeguarding Agent will support and co-lead awareness sessions with the community. The sessions focus on:

- The definitions of SEA
- Expected and prohibited behaviors of DRR and humanitarian actors (these behaviors are often described in safeguarding policies and Codes of Conduct)
- How and where to report complaints—including any issues or concerns related to staff misconduct, such as sexual abuse and exploitation
- Where and how to refer people to services so they can get help to recover if they have been harmed

Signed by:	Date:

### The role of a community Safeguarding Agent throughout a disaster timeline

PRE-DISASTER	DURING DISASTER	POST-DISASTER
(24–48 HOURS BEFORE)	(WITHIN 24 HOURS)	(24–48 HOURS AFTER)
<ul> <li>Closely follow the national disaster management agencies' advisory 48 hours before a natural hazard hits.</li> <li>Coordinate with the local disaster management committee (or local equivalent) on the safeguarding support needed (in disaster preparedness initiatives).</li> <li>Identify existing referral pathways and feedback mechanisms in the community.</li> </ul>	<ul> <li>Visit evacuation centers and record people's safeguarding issues and concerns.</li> <li>Help the local disaster management committee set up or adapt existing hotlines and help desks.</li> <li>Tell people how to find help (orient them on referral pathways).</li> <li>Tell people how to make complaints or give feedback.</li> </ul>	<ul> <li>Help with psychological first aid.</li> <li>Share data trends/concerns related to safeguarding/SEA with the relevant local offices or agencies.</li> </ul>

# Part 3: 3.3 Safeguarding Agent Training Pack

#### Purpose:

This training is designed to build the knowledge and capacity of community Safeguarding Agents. Community Safeguarding Agents are volunteers recruited from communities. They will be the first point of contact for community members who experience safeguarding issues during crises or disasters. The aim of this training is to increase their understanding of:

- What is meant by "safeguarding" and why it is important
- What we mean by Protection against Sexual Exploitation and Abuse (PSEA)
- How safeguarding affects survivors and communities
- Basic concepts of Psychological First Aid (PFA) and a survivor-centered approach
- The role of community Safeguarding Agents and how they should safely respond to protection disclosures

#### Participants:

■ Community Safeguarding Agents

#### Time:

■ Two days

#### Handouts:

- HO 25: Key Messages on Rights and Entitlements
- HO 26: IASC Six Rules
- HO 27: Bond Code of Conduct (optional)
- HO 28: WHO Psychological First Aid pocket guide handout

#### Training tools:

- TT 20: Power Walk Characters
- TT 21: True/False Signs
- <u>TT 22</u>: Exploitation and Abuse Case Studies
- <u>TT 23</u>: Exploitation and Abuse Scenarios
- TT 24: Code of Conduct Breaches
- TT 25: Reporting Scenarios
- TT 26: Referral Web Nametags
- TT 27: Referral Pathway Card
- TT 28: Safe Responses Cards
- TT 29: Dos and Don'ts of Psychological First Aid

#### Materials:

- Flip chart and markers
- Sticky notes
- Pens and paper
- Ball of string

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

#### Session outline:

	MINUTES	SESSION	
	30	Session 0: Introduction	
	75	Session 1: Understanding Safety, Dignity and Human Rights	
DAY 1	60	Session 2: Understanding Safeguarding	
DA	60	Session 3: The Impact of Safeguarding Violations	
	LUNCH		
	105	Session 4: Identifying Code of Conduct Breaches	
	30	Closing, Questions and Feedback for the Day	

	MINUTES	SESSION	
	30	Recap from Day 1	
	75	Session 5: Reporting	
2	60	Session 6: Referral Pathways and Service Maps	
DAY 2	60	Session 7: How to Safely Support Someone in Distress	
	LUNCH		
	45	Session 7 (continued): How to Safely Support Someone in Distress	
	60	Session 8: Key Messages for Communities	
	30	Session 9: Closing	

#### **Facilitation Notes**

#### Introduction:

■ Welcome and introduction

#### Time:

■ 30 minutes

#### Handout:

Agenda

#### Materials:

- Ball
- Flip chart and markers

#### **WELCOME, 5 MINUTES**

#### Presentation

WELCOME everyone to the Safeguarding Agents' training.

**INTRODUCE** yourself (name, organization, position, background, etc.) and the purpose of the session. **EXPLAIN** that this training will cover the concepts of safeguarding and protection from sexual exploitation and abuse. It will help Safeguarding Agents become key focal points in their communities for anyone who has experienced exploitation and abuse by organizations and local governments.

**EMPHASIZE** that this is a safe space for learning from other people's experiences and that everyone can share freely—there are no right or wrong answers.

**ENCOURAGE** everyone to participate. Create a comfortable and informal atmosphere by using everyday language and avoiding jargon.

#### **INTRODUCTIONS, 10 MINUTES**

#### **Exercise**

**ASK** participants to stand in a circle. **GIVE** one participant a ball. **ASK** them to say their name, role and what they hope to learn from this training. **ASK** the participant to throw the ball to another person in the circle and repeat.

#### TRAINING OBJECTIVES AND AGENDA, 5 MINUTES

#### Presentation

**EXPLAIN** that this training is for community Safeguarding Agents. **ASK** participants what they know about the role of a Safeguarding Agent. **DISCUSS** in plenary. Explain that in this training they will learn about their roles and responsibilities.

**HIGHLIGHT** the following key responsibilities of Safeguarding Agents:

- Be a first point of contact for community members who experience safeguarding issues during an emergency response.
- Raise awareness on safeguarding, particularly around rights and entitlements for community members. This includes expected and prohibited behavior for organizations and local governments.
- Understand the reporting mechanisms of local organizations and governments. Tell community members how they can report complaints.
- Learn about local service providers where community members can get more support.
  Share this information with communities.

Safely support community members who have been harmed by a person working for the local government or organization. This includes telling them how they can report and access other services (like healthcare).

**EXPLAIN** the objectives of this two-day training and the agenda.

**EXPLAIN** that the training will include exercises, role-plays, discussions and group work.

#### **RULES AND HOUSEKEEPING, 5 MINUTES**

#### Brainstorm

**ASK** participants what "rules" they would suggest to ensure the workshop runs smoothly; for example:

- Turn off mobile phones and laptops
- Listen to other people
- Raise their hand to ask questions
- Participate actively
- Stick to set times

WRITE these on the flip chart and stick the rules onto the wall.

**EXPLAIN** to participants where to find the nearest fire exits and bathrooms.

#### PARTICIPANT FEEDBACK, 5 MINUTES

#### Presentation

**EXPLAIN** that feedback is important to improve the training. Any feedback is welcome.

#### **Suggestion Box**

**PLACE** a labeled suggestion box in an easily accessible part of the room, along with slips of paper and pencils.

At the end of each day, **ASK** participants to write down and post any feedback (positive or negative) that could improve the workshop. They can do this anonymously.

**EXPLAIN** that the facilitators will review suggestions at the end of the day.

Each day, **SHARE** what has changed (if any) as a result of feedback, and why (or why not).

#### Car Park

On a special flip chart page, **WRITE** down any issues that are not linked to safeguarding or that need more time to discuss. These "parked" ideas can be reviewed at the end of the day or workshop.

#### **Session 1: Understanding Safety, Dignity and Human Rights**

#### Time:

■ 75 minutes

#### **Objectives:**

- Participants understand people's right to live with safety and dignity, free from harm
- Participants understand that certain people are more at risk of harm

#### Key Messages:

- Rights belong to everyone and cannot be taken away. However, some people's rights are not respected. They are more at risk of harm, abuse or exploitation.
- Organizations and local governments should respect people's dignity and safety. They should not hurt or harm people when they offer them assistance.
- Safeguarding Agents play a key role in helping communities understand these rights. They also play a key role in responding if organization or government actors violate their rights.

#### Handout:

■ HO 25: Key Messages on Rights and Entitlements

#### **Training Tools:**

- <u>TT 20</u>: Power Walk Characters
- TT 21: True/False Signs

#### Materials:

■ Flip charts and markers

#### 1.1 WHAT ARE RIGHTS? 10 MINUTES

#### **Presentation**

#### **Purpose**

Participants understand that human rights belong to everyone

#### Process

ASK participants what the term "human rights" means to them.

**EXPLAIN** that there are **basic rights and freedoms that belong to each person in the world, from birth until death.** The Universal Declaration of Human Rights, a document adopted by the United Nations, explains 30 rights and freedoms that belong to every person in the world.

**ASK** participants to give examples of some human rights of which they are aware. Write them on a flip chart.

**SHARE** some of the human rights we all have, for example:

- Everyone is born free and has dignity as a human.
- Everyone has the right to life and the right to live in freedom and safety.
- Everyone has the right not to be hurt, tortured or treated cruelly.
- Everyone has the right to be treated as a person under the law everywhere.
- Everyone has the right to a home, enough food and health care.

**EXPLAIN** that these rights belong to everyone and that no one can take them away from us.

**EXPLAIN** that as Safeguarding Agents, they will help community members understand their right to live with dignity and safety, especially in relation to governments and organizations doing disaster work.

#### **Debrief**

- Rights belong to everyone and no one can take them away.
- As Safeguarding Agents, they will help people understand and access those rights safely and with dignity.

#### 1.2 UNDERSTANDING SAFETY AND DIGNITY, 10 MINUTES

#### **Exercise**

#### **Purpose**

Participants understand the concepts of safety and dignity and that all people have the right to live in safety and in dignity, free from abuse and harm

#### **Process**

**EXPLAIN** that it is important for community Safeguarding Agents to understand safety and dignity. As Safeguarding Agents, they will help protect community members' right to live in safety and with dignity.

**DIVIDE** participants into two groups.

**WRITE** "SAFETY" and "DIGNITY" on separate sheets of flip chart paper and give one to each group

**ASK** participants to write down other words or phrases to explain the word they have been given. They can also use drawings. **GIVE** each team 5 minutes to do this and then ask them to rotate to the next word (switch words).

**ASK** them to return to the word they started with and present their ideas about what safety and dignity mean.

In plenary, **DISCUSS** some examples. Explain the definitions below:

- **Safety:** Being protected from danger, risk or injury—including physical, environmental, social, spiritual, political, emotional or psychological harm.
- **Dignity:** The importance and value of a person, which gives them self-respect and makes others respect them.

To encourage discussion, ask participants the following questions:

Can you share a time when you felt like you were not safe? What made you feel that way?

■ Can you share a time when you felt like you were not respected? What made you feel that way?

**EXPLAIN** that we all have rights and freedoms that belong to every person. This includes the right to live in safety and with dignity. Everyone has the right not to be hurt or mistreated. This is important to understand when receiving assistance and services from organizations or the government. Safeguarding Agents play an important role in telling communities about these rights. Organizations and local governments must respect people's dignity and safety when they offer assistance and services. They must not cause people harm.

#### **Debrief**

- All people have the right to live with dignity and safety.
- Organizations and local governments must respect people's dignity and safety when they offer assistance and services. They must not cause harm to people. Safeguarding Agents play an important role in helping communities understand these rights and will respond if these rights are violated.

#### 1.3 POWER WALK, 25 MINUTES

#### **Exercise**

#### **Purpose**

Participants will understand that everyone has the right to live in safety and with dignity. However, sometimes people do not respect this right in the most vulnerable people in communities. They are at higher risk of being harmed.

#### **Process**

**EXPLAIN** that everyone has the right to live with safety and dignity, but not everyone experiences this, particularly vulnerable groups. Because of this, it is important for community members to recognize when someone is being harmed so they can speak up and deal with these problems. Safeguarding Agents play an important role in helping community members do this.

**ASK** participants to stand in a single row across one side of the room, facing the facilitator.

**DISTRIBUTE** the *Power Walk Characters* (TT 20) to the participants. **TELL** them not to share who is their character.

**ASK** them to pretend to be that character, and to form a mental picture of who they are and what their life is like. They must then think about how their characters would respond to a list of statements that you will read out.

**ASK** them to listen to the statements and take one step forward if they agree with the statement, and to stay where they are if they disagree with the statement.

**READ** each of the following statements, and give participants enough time to decide whether to take a step:

- I have cash in my pocket.
- I have a valid, government-issued ID.
- I have access to a telephone.
- If I am hurt, I can see a doctor and pay (if necessary) for their services.
- If a staff member of a non-governmental organization (NGO) or local government asked me on a date, I would not be afraid to say no.
- I finished secondary school.
- I am not afraid to walk alone at night.
- I have enough to eat and would never need to consider exchanging sex for food or money.
- I can read.
- If I was abused by a local government staff member, I would feel comfortable reporting this to the government.
- My family and community respect my opinions and ideas.

**ASK** the participants to reveal their identities and to explain why they did/did not step forward in response to particular statements. The following questions may be helpful:

- What did you notice about people's access to their right to live with safety and dignity?
- Who are the more vulnerable members of the community? Who are the more powerful members of the community?

#### **Debrief**

In plenary, HIGHLIGHT that:

- It was clear that participants were scattered across the room. Those with more power were closer to the facilitator and those who were more vulnerable were further back in the room.
- Even though everyone has the right to live with safety and dignity, not everyone experiences this. The least powerful, most vulnerable people in a community are often at risk of harm or exploitation.
- Safeguarding Agents will play a key role in helping people understand and access their rights. They will help increase people's sense of safety and dignity.

#### 1.4 TRUE OR FALSE: RIGHTS AND ENTITLEMENTS, 30 MINUTES

#### **Exercise**

#### **Purpose**

To learn about the rights and entitlements of people affected by crisis

#### **Process**

**EXPLAIN** that Safeguarding Agents play an important role in helping people understand their rights and entitlements when they receive assistance and services from organizations and local governments in an emergency.

**EXPLAIN** that people receiving assistance have rights—including the right to access basic services on the basis of need, to live in safety and dignity, not to be hurt, to get information about available services and assistance and to be able to give feedback and complain. Safeguarding Agents will share key messages with community members about these rights.

**PLACE** the *true* and *false* signs (TT 21) in two locations (for example on either side of the room or training space). **ASK** participants to stand between them. **EXPLAIN** that you will read some statements. If participants believe the statement is true, they should stand by the "true" sign. If they believe the statement is false, they should stand by the "false" sign.

After each statement, **ASK** a participant under each sign to explain why they chose that answer. After a discussion, **SHARE** the correct response.

- Emergency assistance and services given by organizations are free.
  - Answer: TRUE. Emergency assistance and services are free. No one should be asked for favors in exchange for this help. A favor is something given to someone even though they do not owe it to them. For example, if someone asks for money or goods or sex for something that should be free, they are asking for a favor.
- Information about assistance and services and how people are chosen to get them is private information (how people are chosen is called "selection criteria").
  - Answer: FALSE. People receiving assistance and support have the right to get
    information about services and assistance and to understand the selection criteria for
    them. This is not private information. Anyone can ask about it if the information is not
    shared.
- Assistance and services should be based on need.
  - **Answer: TRUE.** Assistance and services should be based on need. People should not be left out because of their sex, age, religion, etc.
- Abuse of power of any kind over people and communities that causes harm is never okay.

- **Answer: TRUE.** People should always be treated with dignity. If anyone feels uncomfortable or that their dignity or safety are at risk, they have the right to say something and get help to solve the problem.
- If someone working for an organization providing services has asked a person to do something inappropriate, it is best **not** to report it for safety and privacy reasons.
  - **Answer**: **FALSE**. Inappropriate behavior should always be reported. The person complaining has the right to do this in a safe and confidential way. They also have the right to get a response about their complaint.
- Organizations and local governments do **not** have to share information on how to report complaints. This is because the information is about their own internal procedures.
  - **Answer: FALSE.** Everyone has the right to report any inappropriate behavior. Organizations and local governments should clearly explain how to report complaints. If this has not been explained clearly, the organization can be asked for this information.

In plenary, **HIGHLIGHT** the key points that came up in the activity. **GIVE** participants the handout on *Key Messages on Rights and Entitlements* (HO 25). **EXPLAIN** that Safeguarding Agents will share these messages with community members.

- The types of assistance and services people get are based on their needs.
- No one should use their power to control people or communities.
- People have the right to be told about available assistance and services.
- People have the right to know how people are chosen to get assistance or services (this is called "selection criteria").
- It is never okay if people working for organizations or local governments abuse their power, harm anyone in the community or treat them inappropriately. For example, no one should ever ask for favors in exchange for assistance or services.
- People have the right to report any inappropriate behavior or harm.

#### Session 2: Understanding Safeguarding

#### Time:

■ 60 minutes

#### Objectives:

- Participants understand what "safeguarding" means
- Participants understand that safeguarding covers a range of harms. It includes Protection against Sexual Exploitation and Abuse (PSEA)

#### Key Messages:

- It is never okay for staff offering services to behave inappropriately or abuse their power.
- Organizations and local governments are responsible for preventing exploitation and abuse by their staff members.
- Any incidents that happen are not the fault of community members.
- Safeguarding Agents play a key role in helping community members understand that harm and abuse are never okay.

#### **Training Tool:**

■ <u>TT 22</u>: Exploitation and Abuse Case Studies

#### Materials:

- Flip charts and markers
- Vouchers (pieces of paper) and chairs

#### Preparation:

■ Set up role-play

#### 2.1 STAFF CONDUCT ROLE-PLAY, 30 MINUTES

#### **Exercise**

#### Purpose

Participants understand and can identify safeguarding issues in staff behavior

#### **Preparation**

Before the training starts, or during a break, choose another facilitator to play the second role in the role-play. Choose five volunteers who will participate in the role-play. Make sure they are clear on the purpose and messages of the scenario.

**PLACE** five chairs at the front of the room or gathering space. *NOTE:* if no chairs are available, use other items (for example pens, fruit, notebooks, etc.). Prepare ten vouchers (pieces of paper) for the activity.

#### **ASSIGN** roles to the facilitators:

- One facilitator oversees the vouchers.
- The other facilitator oversees the chairs (or other items).

#### **Process**

 $\textbf{INVITE} \ the \ five \ volunteer \ participants \ to \ come \ to \ the \ front \ of \ the \ room \ or \ facilitation \ space.$ 

**ASK** the rest of the participants to watch the role-play and reflect on how it relates to the earlier discussion about safety and dignity.

**ASK** the participants to get into a line and face the audience. This way the audience can see and hear what the facilitators and participants are saying. **SPEAK** clearly and loudly and explain what is happening when needed to make sure that the audience hears and understands what is being said.

#### **ROLE-PLAY** as follows:

#### Facilitator 1:

**TELL** the group of five participants that you can see they have suffered a lot lately. Tell them you are there to help them. You have noticed they have no chairs (or other items), but you have vouchers they can use to get chairs. Tell them they are free to ask questions. Tell them they should come one at a time to get the vouchers. Then, they should trade in their youchers for chairs.

ASK the five participants to come forward and line up. Explain that you have the vouchers, which they can turn in to get chairs.

**DEMONSTRATE** inappropriate, disrespectful behavior to each of the five participants (**ENSURE** that the behavior and exchanges are clear for the watching audience and explain when needed). Change which behaviors you use and in what order based on the context and participants. The below examples are only a guide and can be adapted. Facilitators do not need to follow the exact script or order.

- Participant 1: Give the participant one voucher. Ask for money in exchange for a second voucher. If they agree, tell them you will give them an extra voucher. If they refuse, say that they will not receive another voucher. Tell them not to tell anyone else about the request for money or you will make sure that they do not get a chair.
- Participant 2: Wink at the participant or demonstrate favoritism (for example complementing them). Give them two vouchers and ask them to give you their personal phone number, as you would like to call them later and visit them at home that evening.
- Participant 3: Tell the participant that you know their uncle and that he is a good family friend. Give the participant three vouchers.
- Participant 4: Give the participant one voucher. Tell them that they will get two vouchers if they go buy goods for you at the market (give an example of a good based on context). Tell them that this needs to be a secret and not to tell anyone.
- Participant 5: Tell the participant that you do not think they should be in the program and that you are running low on vouchers. Refuse to give the participant a voucher, explaining that next time they can get one.

If any participants ask questions, demonstrate inappropriate behavior (ignore them, speak to them in a different language, turn your back on them, etc.).

Once participants have received the vouchers, **EXPLAIN** that they should go to **Facilitator 2** to get their chairs.

#### Facilitator 2:

**ASK** participants to line up to get their chairs one-by-one.

**ASK** the participants to get into a line and face the audience. This way, the audience can see and hear what the facilitators and participants are saying. **SPEAK** clearly and loudly and explain what is happening when needed to make sure that the audience hears and understands what is being said.

**DEMONSTRATE** inappropriate behavior. Change which behaviors you use and the order in which you use them based on the context and participants.

- Participant 1: Offer a chair to the participant in exchange for a date. If they refuse, tell them you will not give them a chair. If they agree, tell them you will give them two chairs.
- Participant 2: Tell them that you will only give them the chairs at their home and you will visit them later that night at their house. Refuse to give them a chair and ask them to tell you where they live and to give you their personal phone number so you can call them to say hello.
- Participant 3: Give the participant one chair for the three vouchers and ask them to give you money with their next vouchers to get more chairs. Tell them that if they tell anyone about your request, you will take away their chair.
- Participant 4: Tell the participant that you know their father, who is a local leader, and that you are so happy to see them. Give them three chairs.

■ Participant 5 (did not receive a voucher): Tell them that there are no more chairs left and to leave the distribution. Tell them you cannot help them. Ignore them if they ask questions.

**TELL** participants that if they are unhappy because some of them now have one chair but others have multiple or none, they should work it out between themselves and exchange what they have.

After the role-play, **ASK** participants to return to their seats and **DISCUSS** in plenary. Use these questions to guide the discussion:

- How did you feel about the behavior of the staff? Thinking about safety and dignity, what behavior was inappropriate? What behavior caused harm?
- Did the staff give you free assistance?
- Did staff ask for anything in exchange?
- Did the staff allow you to ask questions or complain?
- Did the staff give you information about who got a chair and how many you should get?

**EXPLAIN** that abuse of power by staff providing services is always unacceptable.

**EXPLAIN** that safeguarding means protecting community members from harm and the abuse of power by organizations and local governments. The role-play showed many problems with staff behavior and abuse of power (staff members were asking for money in exchange for chairs and vouchers, asked for other favors, treated community members unfairly, etc.).

#### **Debrief**

- Inappropriate behavior and abuse of power by staff members providing services—including asking for favors in exchange for assistance—is never okay.
- Organizations and local governments must protect community members against the abuse of power and inappropriate behavior by staff members.

## 2.2 DEFINING SAFEGUARDING AND PROTECTION AGAINST SEXUAL EXPLOITATION AND ABUSE (PSEA), 15 MINUTES

#### **Presentation**

#### **Purpose**

- Participants understand the meaning of safeguarding and PSEA
- Participants understand that safeguarding includes PSEA

#### **Process**

**ASK** participants what they think of when they hear the word "safeguarding." **ASK** the following questions, referring to the role-play as needed:

- What does safeguarding mean to you?
- What are some examples of safeguarding problems that you saw in the staff member's conduct during the role-play?

**EXPLAIN** that safeguarding means protecting community members from harm and abuse of power by organizations and local governments. The role-play showed them many problems that can happen when staff members behave badly and abuse their power:

- They asked for money for chairs and vouchers.
- They asked for other favors.
- They treated community members unfairly, etc.

**EXPLAIN** that one important part of protecting community members from harm is protecting against sexual exploitation and abuse (PSEA). PSEA is an important part of safeguarding.

**ASK** participants what they think of when they hear the phrase "sexual exploitation and abuse." **EMPHASIZE** that they do not need to share a personal experience and can mention something they have heard. **TELL** participants not to mention names or identify anyone. If they are not comfortable, they do not need to share anything at all.

Use the following questions as prompts:

- What does sexual exploitation and abuse look like in your community?
- In the role-play, what were some examples of sexual exploitation?
  - Staff asking for favors—such as going on a date.
  - Staff asking for contact information so they could visit participants at their homes.
  - Staff behaving inappropriately and making participants feel uncomfortable or unsafe,
- What examples of sexual exploitation and abuse are you familiar with? If participants don't share, bring up examples:
  - Organizations and local government staff asking for sex in exchange for aid.
  - Making inappropriate sexual comments about community members, etc.

#### **EXPLAIN** that:

- Safeguarding means protecting community members from harm and abuse of power by organizations and local governments.
- Safeguarding includes PSEA:
  - Sexual abuse is any unwanted physical act or violation (or attempted physical act or violation) that is sexual, by force or in a situation where there is unequal power. Any sexual activity with a child (anyone under 18 years of age) is sexual abuse.
  - Sexual exploitation means abusing power for sexual purposes—such as asking people to exchange sex in return for something.

**EXPLAIN** that abuse and exploitation are never okay, under any circumstance. It is the responsibility of organizations to stop their staff from harming people and communities.

#### **Debrief**

- Safeguarding means protecting community members from harm and abuse of power by organizations and local governments.
- Staff members working for organizations and local governments should:
  - Always treat community members with respect and dignity.
  - Always keep community members safe from harm.
  - Never ask community members for any kind of sexual favor in exchange for assistance or services.
  - Never harm, hurt or abuse community members.
  - Never have any sexual contact or relationships with community members or with anyone under 18 years of age.

#### 2.3 CASE STUDIES: SEXUAL EXPLOITATION AND ABUSE, 49 15 MINUTES

#### **Exercise**

#### **Purpose**

Participants can explain examples of sexual exploitation and abuse based on their understanding of safeguarding and PSEA

#### **Process**

**ASK** participants to form two groups. **GIVE** each group *four case studies* ( $\boxed{\text{TT 22}}$ ). **ASK** them to talk about the following questions in their groups for 10 minutes:

- Which behaviors in the case study do you think are unacceptable?
- Is the case study an example of sexual exploitation or abuse?

**ASK** each group to share answers in plenary. **HIGHLIGHT** the following points:

<sup>&</sup>lt;sup>49</sup> Case studies taken from *IASC Saying No to Sexual Misconduct (2020)* available at: <u>IASC Learning Package on Protection from Sexual Misconduct</u> for UN partner organizations | IASC (interagencystandingcommittee.org).

- Case study 1: This is an example of sexual abuse because it is a threat of an unwanted sexual act. There is unequal power because Mr. Sanjit works for the government and has access to resources and power. Making a threat is sexual abuse, even if the act has not taken place.
- Case study 2: This is an example of sexual exploitation because it involves exchanging money for sex. There is unequal power because Mr. Shin works for an international NGO and has access to resources and aid that the community needs. It does not matter if prostitution is legal in the country, it is still sexual exploitation.
- Case study 3: This is an example of sexual exploitation because it involves exchanging a ride to the school for photographs of a sexual nature. There is unequal power because the driver works for an international organization and has access to resources (such as vehicles).
- Case study 4: This is an example of sexual abuse because it is an unwanted physical act that is sexual. Even volunteers are in a position of power because they have access to resources and have decision-making authority in communities.

- Sexual exploitation and abuse are very serious Codes of Conduct breaches and are never okay.
- It is the responsibility of the organization and local government to prevent sexual exploitation and abuse.
- Any incidents that happen are not the fault of community members.
- Safeguarding Agents play an important role in helping community members understand that sexual exploitation and abuse are never okay.

#### **Session 3: The Impact of Safeguarding Violations**

#### Time:

■ 60 minutes

#### **Objectives:**

- Participants understand why safeguarding is important
- Participants understand how safeguarding violations affect survivors and communities

#### Key Messages:

- Abuse of power can happen at all levels of an organization or local government.
- Some people are more vulnerable to abuse and exploitation than others.
- Abuse can have a big impact on the survivor, communities and organizations.

#### **Training Tool:**

■ TT 23: Exploitation and Abuse Scenarios

#### Materials:

Flip chart and markers

#### Online Resource:

■ VOA Africa, Oxfam Scandal Global Aid video: https://www.youtube.com/watch?v=xKpjG7ORITg.

#### 3.1 OXFAM VIDEO, 15 MINUTES

# Video and discussion

#### Purpose

Participants understand why safeguarding is important and how it affects both program participants and organizations

#### **Process**

**EXPLAIN** that you will watch a short documentary to start the session. **EXPLAIN** that in the Oxfam case, Oxfam staff members, including the director, abused and exploited sex workers after the 2010 Haiti earthquake. The organization tried to cover this up. **EXPLAIN** that this safeguarding incident was a turning point for the aid community. It was all over the news. It was about people abusing their positions of power to harm others.

After showing the video, ASK:

- How do you feel after watching this video?
- Why do you think this happened?
- How could this have been prevented?

After a discussion, **EXPLAIN** that it is important to remember that there are power imbalances between organizations, local government staff/volunteers and vulnerable community members. This is because people in the community rely on the goods and services that organizations and local governments give them. They often depend on these things to survive.

- Abuse of power can happen at all levels of an organization.
- This can have important consequences for affected communities—including survivors. It can also have important consequences for the organization.

#### 3.2 VULNERABILITIES,<sup>50</sup> 20 MINUTES

#### **Exercise**

#### **Purpose**

Participants reflect on vulnerabilities in their context and who is more vulnerable to exploitation and abuse

#### **Process**

**ASK** participants to turn to the person sitting next to them and talk about the following:

List the participants who are most vulnerable to abuse and exploitation in their community and explain why.

After 10 minutes, **DISCUSS** in plenary. **EXPLAIN** that abuse and exploitation can happen to anyone. However, certain groups are generally at higher risk than others. For example:

- Children (particularly children who do not have parents or family members with them)
- People with disabilities
- Women (particularly female-headed households)
- Displaced individuals/refugees
- Minority groups (ethnicity, social class, etc.)
- Out-of-school children/working children

**ADD** that, as we can see, vulnerabilities can be related to sex, age and diversities—such as ethnicity, religion and disability. People who experience several forms of vulnerability are at even higher risk of exploitation and abuse. For example, a person who is both female and has a disability.

**HIGHLIGHT** that people who already experience one form of abuse or exploitation are at greater risk of other forms of abuse and exploitation.

**GIVE** the example of a working child. This child may be more vulnerable to sexual abuse by their employer because they are isolated and depend on their employer.

#### **Debrief**

- It is important to understand how vulnerability factors—such as sex, age and diversity—can make someone more vulnerable to exploitation and abuse.
- Those with more than one vulnerability are at even higher risk.

#### 3.3 IMPACT OF EXPLOITATION AND ABUSE, 25 MINUTES

#### **Exercise**

#### **Purpose**

Participants understand how exploitation and abuse affect people

#### **Process**

GIVE participants (or READ aloud) the *exploitation and abuse scenarios* (TT 23). In groups of three–five persons, ASK participants to talk about and list some of the consequences of exploitation and abuse. ASK participants to consider how it affects survivors, the community, the organization and the offender. They should also consider the health, economic and emotional consequences.

In plenary, **ASK** each small group to give feedback from their scenarios and **DISCUSS** as a whole group.

Facilitator notes: examples of impacts

#### For the survivor:

- Physical harm, pain, trauma
- Psychological harm
- Sexually Transmitted Diseases (STDs)
- HIV/AIDS

<sup>&</sup>lt;sup>50</sup> Taken from CRS Partner Safeguarding Toolkit (2022) available at: <u>Strengthening Partners in Protection Against Sexual Exploitation and Abuse (SPSEA) | CRS.</u>

- Infertility
- Stigma and loss of reputation
- Shame, guilt
- Fear, confusion, depression
- Self-harm, death
- Rejection by spouse/family
- Being shunned by the community
- Loss of job/income
- Loss of access to education/opportunity
- Unwanted pregnancy, abortion
- Breakdown of support structures

#### **■** For the community:

- Loss of trust
- Unwanted children
- Drain on resources
- Breakdown of support structures

#### **■** For the organization:

- Loss of community's trust
- Loss of funding
- Security risk
- Loss of staff

#### For the offender:

- Sexually Transmitted Diseases (STDs)
- HIV/AIDS
- Loss of job/income
- Loss of reputation
- Shame
- Rejection by spouse/family
- Security risk

- Exploitation and abuse have serious and long-lasting effects on survivors, local communities and organizations.
- Organizations and local governments must not tolerate any sexual exploitation or abuse, or abuse of power.

#### **Session 4: Identifying Code of Conduct Breaches**

#### Time:

■ 105 minutes

#### Objective:

■ Participants learn what actions and behaviors are a breach of the code of conduct (break the rules of staff behavior).

#### Key Messages:

- It is very important to report concerns or suspicions about inappropriate staff behavior—including sexual exploitation and abuse.
- Safeguarding Agents play an important role in helping community members understand what behavior to expect and when a rule has been broken.

#### Handouts:

- HO 26: IASC Six Rules
- HO 27: Bond Code of Conduct (optional)

#### **Training Tools:**

- TT 24: Code of Conduct Breaches
- Local Code of Conduct used by local disaster risk reduction (DRR) or humanitarian actors

#### Materials:

- Afrida video: <u>IASC Learning Package on Protection from Sexual Misconduct for UN partner organizations | IASC / PSEA (interagencystandingcommittee.org)</u>
- Signs with "A," "B," "C," "D"
- Flip chart and markers

#### **4.1 IASC SIX RULES, 25 MINUTES**

#### **Exercise**

#### **Purpose**

- Participants understand the rules that organizations and local government staff must follow
- Participants can identify when someone breaks these rules

#### **Process**

**EXPLAIN** that there are important rules that all workers of organizations and local governments (NGOs, governments) must follow to protect the safety and dignity of people affected by crisis.

GIVE participants the *IASC Six Rules* handout (<u>HO 26</u>). **EXPLAIN** that Inter-Agency Standing Committee (IASC) is an important United Nations (UN) humanitarian coordination group. IASC created six rules for how staff members should behave when they offer support and assistance to people affected by crisis. These apply to any actors working in the humanitarian response fields and includes service providers—such as governments. The rules focus on preventing sexual exploitation and abuse.

**EXPLAIN** that all staff must follow these rules:

- Any staff member who breaks one of these rules can be disciplined or even fired.
- Staff members must NOT have sexual relationships with anyone under 18 years of age. Saying they did not know the person's true age is not an excuse.
- Staff members must NOT ask for sex or any kind of sexual favor in exchange for assistance, goods, services, money or jobs.

- Staff members must NOT have sexual relationships with any community members who are receiving assistance.
- Staff members must create an environment that prevents sexual exploitation and abuse.

**EMPHASIZE** that all staff working for organizations and local governments should sign a Code of Conduct that sets out these rules as a minimum standard of behavior.

**DIVIDE** participants into four groups. **GIVE** each group the *Code of Conduct Breaches* (TT 24) and ask them to decide which of the Six Rules the staff broke.

In plenary ASK each group to share their ideas and clarify if needed.

- A male team member comments on a "pretty girl" during a food distribution.
  - Rule broken
  - Breach of the obligation "to create and maintain an environment that prevents sexual exploitation and abuse"
  - Demonstrates degrading and humiliating behavior
- There are rumors that a project staff member added his girlfriend's name to the list of people who will/can receive food aid.
  - Rule broken
  - Breach: improper use of rank or position
- A contracted vendor tells a project participant in your shelter project that she must have sex with them to get her shelter materials.
  - Rule broken
  - Breach: sexual exploitation; it is also a breach of standards because the vendor suggests exchanging goods or services for sexual purposes
  - Anyone contracted by the organization is considered staff; they must follow these standards
- A male volunteer meets a 16-year-old female project participant in a bar for a drink. Then he takes her to his house for sexual intercourse.
  - Rule broken
  - Breach: performing sexual acts with children (anyone under 18 years of age, regardless of the local age of consent)
  - Breach of the standard: "Must create environment that prevents sexual exploitation and abuse"

- All staff members working for organizations and local governments responding to a crisis must follow the IASC Six Rules.
- It is very important to report any concerns or suspicions about sexual exploitation and abuse.

#### 4.2 AFRIDA VIDEO,<sup>51</sup> 30 MINUTES

# Video and discussion

#### **Purpose**

Participants think about power and how the abuse of power can lead to exploitation and abuse

#### **Process**

**EXPLAIN** that participants will now watch a film about a program participant named Afrida and a staff member of a local organization.

After watching the video, **ASK** participants to form small groups of three–five people and consider the following for each of the four characters in the film:

- Which character do you think has power in this case study? How? Why?
- Do you think there is any misconduct in this story? If yes, what went wrong? Which characters were involved?
- What could stop the affected person from reporting the situation?

After 15 minutes, **DISCUSS** in plenary, asking each group to share their thoughts.

**EXPLAIN** the following for each character:

	AFRIDA	ABEL	LARA	FAUSTIN
Who has power? How? Why?	LIMITED POWER  She is the victim. She is a program participant and does not have access to resources.	<ul> <li>POWER</li> <li>He is in a position of power.</li> <li>He has status as a NGO worker and has access to resources.</li> <li>He has the power to say no.</li> </ul>	POWER  She has peer influence and can influence Afrida.	POWER  He is in a position of power.  He has status as an NGO worker and has access to resources.  He has the power to report misconduct.
Is there sexual misconduct? What went wrong?	■ YES—she is the victim of sexual exploitation and abuse.	<ul> <li>YES—he is the perpetrator of sexual exploitation and abuse.</li> <li>He had sex with a program participant.</li> <li>He had sex with a minor (under 18 years of age).</li> <li>He gave more services in exchange for sex.</li> </ul>	■ NO	<ul> <li>NO (not sexual misconduct)</li> <li>BUT there IS</li> <li>MISCONDUCT.</li> <li>He failed to report—he should have reported the sexual misconduct immediately.</li> </ul>

- Community members who receive services and goods always have less power than staff members of organizations and local governments.
- Staff members of organizations or local governments should never have any sexual contact or relationships with community members or with anyone under 18 years of age.
- Any cases of sexual exploitation and abuse must be reported immediately.

<sup>&</sup>lt;sup>51</sup> Video and case studies taken from *IASC Saying No to Sexual Misconduct (2020)* available at: <u>IASC Learning Package on Protection from Sexual Misconduct for UN partner organizations | IASC (interagencystandingcommittee.org).</u>

#### 4.3 CODE OF CONDUCT QUIZ, 25 MINUTES

#### **Exercise**

#### **Purpose**

Participants understand that all staff members of organizations and local governments should sign a Code of Conduct. These standards of behavior apply to all staff at all times.

#### **Process**

**EXPLAIN** that one key role of Community Safeguarding Agents is to make sure community members understand that all staff members of organizations and local governments should sign a Code of Conduct. A Code of Conduct is a document that explains the forbidden behaviors discussed in earlier sessions—such as sexual exploitation and abuse. These standards should apply to ALL organizations. Breaking any of these rules is never okay and must be reported.

**PLACE** signs that say **A**, **B**, **C**, **D** around the room (one letter per sign). **EXPLAIN** that participants should listen to the quiz questions and then move to stand by the letter that corresponds to the correct answer.

- 1. Why is a code of conduct necessary for staff of organizations and local governments?
  - To protect community members from staff abuse
  - To make sure staff of organizations and local governments understand the consequences of misconduct
  - To address ethical issues
  - All the above
- 2. Who should a code of conduct apply to?
  - Only the employees with signed contracts
  - Volunteers
  - All staff, volunteers and associates at all times
  - Staff of local governments

**EXPLAIN** that a Code of Conduct applies not only to the staff of a local government or organization, but also any person, business, organization or partner associated with the organization or local government. For example, if an organization hires a construction company to build shelters, and someone working for the company abuses a community member, they have broken the Code of Conduct. If a volunteer working for a government office exploits a program participant, they have broken the Code of Conduct.

- 3. If a staff member of an organization or local government sees or suspects that someone broke the rules of the Code of Conduct, they should:
  - Investigate to make sure their suspicion is well-grounded
  - Not get involved because other staff members are responsible for these issues
  - Share their suspicion with trusted colleagues
  - None of the above

Offer clarification for each wrong answer: Staff members of organizations and local governments should NEVER investigate a situation themselves. Instead, they should immediately report what they have seen or heard, even if it is just a rumor. Staff should NOT share or spread rumors of misconduct. That breaks the rule of confidentiality (limiting how many people know about a sensitive issue) and puts people at risk.

- 4. What is the correct disciplinary measure for a staff member of an organization or local government who breaches the Code of Conduct?
  - Being fired
  - Warning letter
  - Unpaid suspension from work for 6 months
  - Mandatory PSEA refresher course
- 5. When does the Code of Conduct apply to staff members of organizations and local governments?
  - When staff are working directly with community members
  - In emergency responses
  - During office hours
  - At all times

#### 4.4 REVIEWING A CODE OF CONDUCT, 25 MINUTES

#### **Exercise**

#### **Purpose**

Participants are familiar with Codes of Conduct that local disaster risk reduction (DRR) and local humanitarian actors are using

*NOTE:* if local organizations or a local government working in the community already have a Code of Conduct, ask them for a copy to give to participants. If local Codes of Conduct are not available, use the *Bond Code of Conduct* as an example (HO 27).

#### **Process**

**GIVE** participants a Code of Conduct from a local organization or local government. **DIVIDE** participants into small groups and ask them think about the following questions:

- Are the IASC Six Rules included in this Code of Conduct? If yes, which ones?
- What are the prohibited behaviors in the Code of Conduct?
- Do you think any behaviors are missing from the Code of Conduct? What would you add? After 15 minutes, **DISCUSS** the answers in plenary.

- All organizations and local governments should have a Code of Conduct and all staff should agree to the expected conduct (behavior).
- It is important to share expected and forbidden conduct with community members so they recognize when someone breaches the Code of Conduct.

#### **Session 5: Reporting**

#### Time:

■ 75 minutes

#### **Objectives:**

- Participants understand expectations for community Safeguarding Agents and how to respond safely when someone shares a safeguarding issue
- Participants understand how to support community members during the reporting process

#### **Key Messages:**

- Safeguarding Agents play a key role in helping community members report concerns and understand their rights.
- Safeguarding Agents should understand the reporting processes for organization and local government actors who are working in their communities.

#### **Training Tool:**

■ TT 25: Reporting Scenarios

#### Materials:

- Flip chart and markers
- Sticky notes and pens
- Blindfolds

#### **5.1 CASE STUDY ON REPORTING, 10 MINUTES**

#### **Exercise**

#### **Purpose**

Participants understand how important it is to report safeguarding incidents

#### **Process**

**EXPLAIN** that you will look at a scenario of abuse by an organization and they will need to decide what to do next.

**GIVE** participants the *Reporting Scenarios* (TT 25). **ASK** participants to split into small groups and read through Scenario 1. They should talk about the following for 5 minutes:

- As a Safeguarding Agent, what would you do next?
- What could stop a community member (and others) from reporting the situation?

**DISCUSS** in plenary, highlighting that **reporting to the organization** is key because Mr. Abel abused his power and asked for money in exchange for assistance. This is always unacceptable. A Safeguarding Agent's role is to:

- Give the community member information on how to report:
  - Help the program participant understand how to report and explain the channels (a hotline, staff visit, suggestions box, etc.) they can use to report the misconduct.
  - Give information to program participants about how to use each channel.
- Help community members understand they have the right to report/receive a response:
  - Explain that community members have the right to report mistreatment and organizations that offer services must give them clear information on how to report.
  - If an organization does not offer information on how to report, community members should ask for it.
  - Community members have the right to get a response from the organization.

- Safeguarding Agents play a key role in helping community members report concerns and understand their rights.
- Safeguarding Agents can share information on how to report and make sure community members understand their right to make a complaint and report in a safe and private way.
- Community members have the right to get a response to their complaint or concern.

#### 5.2 BARRIERS TO REPORTING—FIELD OF BARRIERS, 25 MINUTES

#### **Exercise**

#### **Purpose**

Participants explore possible barriers to reporting and how to reduce them

#### **Process**

**ASK** participants to split into pairs and to brainstorm reasons why a community member who experienced a safeguarding incident might not report. **ASK** each pair to write down one barrier per sticky note. They can use the following questions as prompts:

- What do you think might stop the person from reporting the situation?
- What could they be afraid of if they report?

**AFTER** 5 minutes, collect the sticky notes and spread them on the floor randomly, to create a "barrier" around five meters (16 feet) from a wall. **EXPLAIN** the following instructions:

- Each pair will work as a team. One person will be blindfolded. Their teammate will help them get through the "field of barriers" (the sticky notes on the floor) without touching them.
- The blindfolded team member must remain silent during the activity. All blindfolded participants must line up behind the "field of barriers" made of sticky notes. They must reach the wall without touching or stepping on a sticky note. If they touch one, they must start over.
- Their teammates should stand near the wall that the blindfolded participants must reach. They guide the blindfolded partner through the "field of barriers" with their voices. They explain where to step and how to avoid touching a sticky note.
- All teams should start at the same time. Blindfolded team members must listen closely and make sure they follow only the instructions from their own partner and not from the other participants.
- The first blindfolded person to reach the wall without stepping on a sticky note wins, and they and their partner receive a candy prize.

After the exercise, briefly DISCUSS the following:

- What was difficult about this activity?
- How did the blindfolded person overcome the barriers to reach the wall? What skills did you use? How did your teammate help you overcome the barriers?

#### **EMPHASIZE** the importance of:

- Communicating clearly
- Establishing trust
- Focusing on trusted information and not getting distracted by other voices

**COLLECT** the sticky notes from the floor and read the barriers listed. These might include:

- Fear of retaliation
- Not having accurate information on how to report
- Not understanding their rights
- Fear that assistance will stop

For each barrier, brainstorm how Safeguarding Agents and local organizations can help participants overcome or reduce the barrier. After discussion, **EXPLAIN** these points about overcoming the barriers:

- Give community members accurate and clear information so they understand what staff behavior is not acceptable, how to report it, and that they have a right to report concerns.
- Make sure that if someone shares a safeguarding complaint it stays confidential. Do not share information about the incident with other community members.
- Build trust with community members and offer them a safe environment to share concerns. (explain that we will talk later about how Safeguarding Agents can safely support someone who is upset and create an environment where they feel comfortable and respected).

Communicate regularly with local organizations to make sure that reporting information is correct and up to date. Encourage local organizations to protect confidentiality and be responsive.

#### **Debrief**

- Community members might not report safeguarding incidents for many reasons—including fear of retaliation.
- Safeguarding Agents must understand these barriers so they can try to reduce them. Then can do this by building trust with community members, protecting confidentiality and regularly sharing accurate information.

#### 5.3 UNDERSTANDING FEEDBACK MECHANISMS AND CHANNELS FOR REPORTING, 10 MINUTES

#### Presentation

#### **Purpose**

Participants understand the meaning of feedback mechanisms and channels for reporting

#### Process

ASK participants what they think of when they hear the word "feedback mechanism."

**EXPLAIN** that feedback mechanisms are systems for community members to give feedback and complaints to organizations and local governments. Every feedback mechanism has different channels for reporting.

ASK participants if they can define a "reporting channel."

**EXPLAIN** that channels are ways that people can report to an organization. For example, a channel might be a suggestion box, hotline or a community field visit. All organizations and local governments should set up channels so that community members can share any issues and feedback about the services and assistance they have received or the behavior of staff.

**ASK** participants to discuss in pairs for 5 minutes and list all the types of channels they can recall. **DISCUSS** in plenary, explaining that channels could include the following:

- Complaint boxes
- Community meetings
- Hotline/phone number
- Help desk at distributions or in the organization's office
- Email address
- WhatsApp number
- Time set aside at the end of every community visit
- Focus group discussions
- A village complaints committee
- Post-distribution monitoring

**EXPLAIN** that in the next activity, participants will think about the different reporting channels available in their communities.

- Feedback mechanisms allow community members to give feedback and make complaints to organizations and local governments.
- Organizations and local governments should set up channels that community members can use for reporting.

#### 5.4 HOW TO REPORT, 30 MINUTES

#### **Exercise**

#### **Purpose**

Participants understand the reporting channels in their communities and how to use them

*NOTE:* before the training, facilitators should collect updated information on reporting channels from organizations and local governments that are working in their area.

#### **Process**

**ASK** participants to split into small groups. On flip chart paper, ask each group to map or draw their answers to the following questions:

- Which organizations and local government actors are working in your community?
- What channels (suggestion box, phone number, etc.) does each organization and local government actor have in place to receive complaints about misconduct by their staff?
- How can you report if you want to use these channels? For example, what are the hours, the contact persons, phone numbers, etc. for the various channels?

After 10 minutes, ASK each group to present.

After discussing in plenary, **GIVE** participants updated reporting information for local governments and organizations that are working in their area.

NOTE: update and collect this information ahead of the training.

**REMIND** Safeguarding Agents how reporting is a part of their role:

- Give community members up-to-date information on how to report.
- Make sure community members understand they have the right to make complaints.

- Safeguarding Agents should understand the reporting processes for the organizations and local government actors working in their communities.
- When it comes to reporting, the Safeguarding Agents gives community members information on how to report and makes sure that they understand they have the right to report any abuse.

#### **Session 6: Referral Pathways and Service Maps**

#### Time:

■ 60 minutes

#### **Objectives:**

- Participants understand expectations for community Safeguarding Agents and understand how to respond safely when someone reports protection/safeguarding issues
- Participants understand how to direct community members to specialized services

#### Key Messages:

- Safeguarding Agents play an important role in giving survivors information about services and directing them toward those services.
- Do not share information about the survivor without informed consent (clear and full permission) from the survivor.

#### **Training Tools:**

- TT 25: Reporting Scenarios
- TT 26: Referral Web Nametags
- <u>IT 27</u>: Referral Pathway Card Template (use completed referral pathway cards developed by government/humanitarian actors, unless they do not exist)

#### Materials:

- Flip chart and markers
- Ball of string

#### 6.1 CASE STUDY ON REFERRAL PATHWAYS, 10 MINUTES

#### **Exercise**

#### **Purpose**

Participants understand their role in directing community members toward specialized protection services

#### **Process**

**EXPLAIN** that you will look at another scenario of abuse by an organization. They need to decide what to do next.

**ASK** participants to split into their two groups again and to read Scenario 2 from the *Reporting Scenarios* (TT 25). They should talk about the following for 5 minutes:

- As a community Safeguarding Agent, what would you do next?
- How could you support the female community member?

**DISCUSS** in plenary. Highlight the importance of the following two actions:

#### ■ Reporting:

- It is important to give the woman information on how to report the abuse
- She needs to understand that she has the right to report
- **Referral pathways** (the community member needs to know):
  - What services are available to support people who have experienced harm (a health clinic, an organization that helps people who have experienced gender-based violence, etc.)
  - How to contact these services to get help (for example, a phone number, a point of contact, etc.)
  - Why it is important to get support (because of how abuse and exploitation can affect a survivor)

**EXPLAIN** the steps for directing people toward support if someone reports abuse:

- Offer the survivor a safe and caring environment.
- Ask what they need now.
- Offer clear and honest information about services—such as healthcare, sexual and gender-based violence (SGBV) services, legal support, etc.
- Orient them toward those services if they give you permission. Give detailed information about the resource/service—including how to access it, times and locations, focal points at the service, safe transport options, etc.
- Do not share information about the survivor or their experience unless the survivor tells you clearly that you can (gives informed consent). Do not record details of the incident or personal information about the survivor.
- In the case of rape, tell the victim how important it is to get medical care within 72 hours.

- Safeguarding Agents play an important role in directing survivors of abuse toward services.

  They should offer accurate information on services.
- Do not share information about the survivor unless they give informed consent (clear and full permission).
- Community members who witness or experience harm need to know that it is important to report.
- It is important for survivors to get support if they experience harm.

# 6.2 REFERRAL WEB, 25 MINUTES

#### **Exercise**

#### **Purpose**

To highlight the importance of simple, accessible and confidential referral procedures

#### **Process**

In plenary, **EXPLAIN** that the *Referral Web nametags* (TT 26) will be given out. These are characters who are likely to interact with a survivor. **ASK** for volunteers. **GIVE** the nametags to the appropriate number of people, telling them to pretend to be their character.

**ASK** the volunteers to sit in a circle with the chairs close together and facing each other. **ASK** the remaining participants to stand outside the circle so that they can easily see the activity.

**EXPLAIN** that the ball of string represents a 17-year-old girl who has experienced sexual abuse. Give the ball to the volunteer with the "SGBV survivor" nametag. **TELL** the volunteers that every time a new character becomes involved in the girl's story, they should throw the ball to that character. The new character must wind some of the string around their finger and continue. NOTE: the ball does not need to go back to the girl after each visit.

#### **TELL** the story as follows:

- The GIRL goes to report the incident to the COMMUNITY LEADER.
- The community leader refers the girl to the **LOCAL NURSE**.
- The nurse sends the girl to the **DOCTOR**, who administers treatment and sends the girl back to the **NURSE**.
- The nurse then refers the girl to the **LOCAL COMMUNITY SERVICES WORKER**.
- The local community services worker provides emotional support but refers the girl to the United Nations High Commissioner for Refugees (UNHCR) COMMUNITY SERVICES OFFICER for more assistance.
- The UNHCR Community Services Officer talks with the girl and discovers she wants to involve the police, so refers the girl to the **UNHCR PROTECTION OFFICER**.
- The UNHCR Protection Officer meets the girl and refers her to the **POLICE OFFICER**.
- The police officer informs the girl that she needs to see a lawyer but must do this via the UNHCR PROTECTION OFFICER.
- The UNHCR Protection Officer refers the girl to a LAWYER.
- The lawyer refers the girl to the **PROSECUTOR**.
- The prosecutor discusses the case with the lawyer and calls the **DOCTOR** about the survivor to get some information about the medical examination. The Doctor asks to see the **GIRL** again because they forgot to examine something, so she is referred back to the doctor.
- The doctor refers the survivor to a **SOCIAL WORKER**.
- The social worker then refers the girl to the **POLICE OFFICER** to bring them some new information.
- The police officer refers the girl back to the **UNHCR PROTECTION OFFICER** to report the incident.
- The UNHCR Protection Officer asks the survivor some additional questions, but the survivor has to talk with the **COMMUNITY LEADER** because she is confused about the original details of the incident.
- The community leader contacts the **PROSECUTOR** to find out the status of the case.

#### After reading the story, ASK:

- Was all of this helpful for the survivor? Was it traumatic?
- Might a situation like this happen in your community?
- What could have been done to avoid making this web of string?

**EXPLAIN** that a gender-based violence (GBV) survivor often has to interact with many people and services that are not well-trained or well-coordinated. This can be confusing to survivors and may prevent them from reporting. This is not only relevant to GBV survivors but also anyone who has been harmed or abused.

#### **Debrief**

#### **EXPLAIN** to participants that:

- Survivors and community members who have experienced harm, abuse or exploitation should not go through complex processes that involve too many people as this can cause additional harm.
- Clear and simple procedures to orient survivors to available services are important.

#### 6.3 REFERRAL PATHWAY CARDS AND AVAILABLE SERVICES, 25 MINUTES

#### **Exercise**

#### **Purpose**

- Participants know about services that are available in their communities
- Participants understand how to direct people who have experienced harm toward specialized services

*NOTE:* for this activity, facilitators should use updated referral pathway cards, if available.

#### **Process**

**ASK** participants the following question:

■ What services do you know about that someone could go to if they needed support because they experienced harm (such as healthcare, legal services, police, etc.)?

**DISCUSS** in plenary. Write down answers on a flip chart.

**ASK** participants to split into small groups. **GIVE** each group an updated referral pathway card (if available) and **ASK** them to discuss:

- What services and organizations on this card are you familiar with? Are any new to you?
- Are there services you know of that you think are missing? If so, what would you add to the card?

*NOTE:* if the *referral pathway cards* are not complete, give participants blank copies ( $\boxed{11\ 27}$ ) and ask them to fill in with services they know.

After 10 minutes, **ASK** each group to share in plenary.

#### **Debrief**

- Safeguarding Agents should have up-to-date information on the services that are available. They should keep a copy of the referral pathway card and use it to direct people to the services they need.
- It is important not to share information about the survivor and their experience with anyone unless the survivor gives clear permission (informed consent).

# Session 7: How to Safely Support Someone Who is in Distress

#### Time:

■ 105 minutes

# **Objectives:**

- Participants understand basic concepts of Psychological First Aid (PFA)
- Participants understand a survivor-centered approach

# Key Messages:

- When responding to incidents of harm, abuse or exploitation, the most important thing is to make sure that everyone is safe. It is also very important not to cause more harm.
- Involve survivors in the process and all decisions that affect them.
- Active listening is an important part of survivor-centered communication. It focuses on listening and giving survivors information, not advice.
- It is important to respect the basic principles of PFA.

#### Handout:

■ HO 28: WHO Psychological First Aid Pocket Guide Handout

# **Training Tools:**

- TT 28: Safe Responses Cards
- TT 29: Dos and Don'ts of Psychological First Aid

#### Materials:

Flip chart and markers

# 7.1 SAFE RESPONSES, 30 MINUTES

#### **Exercise**

# **Purpose**

Help Safeguarding Agents understand how they can respond safely and ethically to abuse that they hear about or witness

#### **Process**

**DIVIDE** participants into groups of three–five people.

**EXPLAIN** that Safeguarding Agents may deal with abuse and violence, either directly by witnessing it or indirectly by hearing about it. Therefore, it is important for them to respond in a safe way that respects the survivor.

**SHARE** the following scenario verbally:

■ You are visiting a community project site early in the morning. A boy runs over to your group and tells your team that a woman was attacked earlier that morning. He takes you to see the woman, who is very upset.

GIVE each group a set of Safe Responses Cards (TT 28).

**ASK** them to read the response cards and talk about the following for each card:

- Do you think the suggested action is safe or unsafe?
- Why do you think the action is safe or unsafe?

When everyone is finished, or after 10 minutes, go through each card in plenary and **EXPLAIN** the responses:

- Ask the woman if she is hurt (safe).
  - A first response step is to check if the survivor needs medical attention.
- Ask for details of what happened/ask the survivor for details of when and where it happened/ask who is responsible for attacking her **(unsafe)**.

- Without proper training to interview survivors, Safeguarding Agents should never try to interview or get detailed information about an incident.
- There is a big difference between asking what happened (not advised) and if a person is okay.
- Safeguarding Agents should listen. They should NOT draw out information. Doing that
  can put them and the community at more risk. It is not helpful to involve someone who
  cannot do anything in response to that information.
- Ask what specific help/assistance she needs. Ask if she is happy for you to contact someone to get support or help (safe).
  - Helping a survivor access the right services (medical, counseling, legal) is an important step. Safeguarding Agents should have a list of services (for example the referral pathway card) for reference.
  - Only contact a service provider if the survivor has given informed consent (clear and full permission).
  - Calmly offering something as simple as water, tea, tissues or help with contacting a friend/relative can be valuable.
- Give the person contact information for health, counseling or other relevant services (safe).
  - If the survivor does not want someone else to contact service providers for them, give them the contact information so they can do it themselves.
- Don't say anything at the time, but later call the police from somewhere private (unsafe).
  - Do not call the police for the survivor unless they give you informed consent (clear permission).
- Do nothing if it is a domestic or family/community matter (unsafe).
  - A survivor of domestic violence needs the same level of support as any other survivor.
     This support can include information about available services. Ignoring domestic violence is not acceptable. Domestic violence is a serious offense in most countries.
- Check safety: your safety and the safety of the affected person and the community (safe).
  - Before you take any action, it is important to check the safety of the survivor, the person they approached for help and the other community members.
- Tell the survivor you will help her find the person responsible for hurting her and ensure that the situation is resolved **(unsafe)**.
  - Safeguarding Agents should NOT investigate the case. They should only direct survivors to available support services.

#### **Debrief**

- The most important thing when responding to incidents of abuse is to not cause more harm.
- Safeguarding Agents should make sure that everyone is safe before doing anything else.
- Safeguarding Agents who witness or hear about allegations can help the survivor access the services they need. They can also give them information if the survivor wants it. They should NOT investigate the case.

#### 7.2 SURVIVOR-CENTERED APPROACH, 15 MINUTES

# **Key messages**

- Do nothing if it is a domestic or family/community matter (unsafe).
  - A survivor of domestic violence needs the same level of support as any other survivor.
     This support can include information about available services. Ignoring domestic violence is not acceptable. Domestic violence is a serious offense in most countries.
- Check your safety and the safety of the affected person and the community (safe).
  - Before you take any action, it is important to check the safety of the survivor, the person they approached for help and the other community members.
- Tell the survivor you will help her find the person responsible for hurting her and ensure that the situation is resolved **(unsafe)**.
  - Safeguarding Agents should NOT investigate the case. They should only direct survivors to available support services.

#### **Debrief**

- Protect the identity, confidentiality and safety of the survivor.
- Involve survivors in the process and any decisions that affect them.
- Support survivors by providing information, NOT by advising, because community Safeguarding Agents are not trained specialists.

# 7.3 ACTIVE LISTENING, 15 MINUTES

#### **Exercise**

#### **Purpose**

Participants build and practice active listening skills

#### **Process**

**EXPLAIN** that empathy and listening skills are important when orientating people toward essential services. Safeguarding Agents need to respond appropriately to:

- Protect survivors from further harm
- Give survivors a chance to talk about their worries without pressure (if they want to, they
  can talk about what happened to them)
- Help survivors to make choices and look for help if they desire
- Help survivors cope with the fear that their community or family might react negatively or blame them for what happened
- Give back control to the survivor when they feel they have lost it because of sexual violence

**ASK** participants what they think of when they hear the words "active listening." **WRITE** down their answers on a flip chart.

**EXPLAIN** the key elements of active listening:

#### ■ Environment/space

- Find a quiet space
- Switch off phones
- Avoid distractions

# ■ Body language

- Make eye contact (if culturally appropriate)
- Sit face-to-face
- Keep body language open—try to avoid crossing arms or legs
- Keep a warm facial expression
- Sit in a confident/attentive posture—lean toward the person
- Nod when they speak

#### Encouraging responses

 Nod and use minimal responses like: "Aha," "mhm," "yes", "okay," "right," etc. Longer responses could be, "I hear what you're saying," or "I understand," or "Can you tell me more?"

#### ■ Offer feedback

- Reflect or paraphrase: "What I'm hearing is..." or "It sounds like you're saying..."
- Summarize the speaker's comments every now and again to make sure you have understood what they are saying

**DIVIDE** participants into pairs. **EXPLAIN** the following activity. Encourage participants to use the principles of active listening that were discussed earlier:

- Participants will be in pairs for 6 minutes.
- Person A will talk uninterrupted for 2 minutes and Person B will listen.
- Person B will then summarize/paraphrase for 1 minute what Person A has said.
- Then reverse roles. Person B will talk for 2 minutes and Person A will listen, and then summarize/paraphrase what Person B has said.
- The suggested topic is: "One time when I felt afraid/felt alone was..." The speaker can choose another topic if they prefer.

After both pairs have talked and paraphrased, **DEBRIEF** with the following questions:

- What did you think was good about this activity? What did you find difficult?
- What did you learn about active listening?

#### **Debrief**

- Active listening skills are important. They empower and support survivors to make decisions for themselves.
- Active listening is an important part of survivor-centered communication. It focuses on listening and giving survivors information but not advice.

# 7.4 PSYCHOLOGICAL FIRST AID ROLE-PLAY, 45 MINUTES

#### **Exercise**

#### **Purpose**

To explore the Dos and Don'ts of Psychological First Aid (PFA)

#### Drocess

**DIVIDE** the participants into two groups.

**HAND OUT** the list of *Dos of Psychological First Aid* (TT 29) to one group and the list of *Don'ts* to the other group. **EXPLAIN** that Psychological First Aid means responding in a humane, supportive way to someone who is suffering and who may need help.

**TELL** participants to role-play as Safeguarding Agents visiting a community (choose a scenario that suits the context).

**GIVE** each group a scenario to role-play, for example:

- A woman has been attacked and is laying by the side of the road with an injured leg.
- An old man has been robbed of all his food supplies.
- An abandoned child is found on the outskirts of a community.
- A young girl is at risk of being trafficked.

**GIVE** the groups 20 minutes to prepare a role-play/drama that highlights either the Dos or the Don'ts assigned to them, using the scenario. This means one group will be doing all the "wrong" things and the other group will be doing the "right" things.

NOTE: if there are many participants, create more groups.

**ASK** the two groups to perform their role-plays. The other participants try to identify the Dos or Don'ts in their behaviors.

In plenary, **DISCUSS** the behavior that the observing group noticed. Allow the groups to talk about their ideas until there are two comprehensive lists of Dos and Don'ts for all of the groups. **WRITE** their ideas on a flip chart.

GIVE participants the WHO Psychological First Aid pocket guide handout (HO 28).

#### **Debrief**

In plenary, **HIGHLIGHT** key points from the full list of Dos and Don'ts for PFA:

#### DOs

- Be honest and trustworthy.
- Respect people's right to make their own decisions.
- Be aware of and set aside your own biases and prejudices.
- Make it clear to people that they can still get help in the future even if they don't want it now.
- Respect privacy and keep the person's story confidential if appropriate.
- Consider the person's culture, age and gender so you can behave appropriately.

# DON'Ts

- Don't take advantage of your relationship as a helper.
- Don't ask the person for money or favors for helping them.
- Don't make promises you cannot keep or give incorrect information.
- Don't exaggerate your skills.
- Don't force help on people and don't be intrusive or pushy.
- Don't pressure people to tell you their story.
- Don't share the person's story with others.
- Don't judge the person for their actions or feelings

# **Session 8: Key Messages for Communities**

#### Time:

■ 60 minutes

# Objective:

Participants understand key messages they need to share with communities about safeguarding, rights and entitlements

# Key Message:

■ It is important to share key messages with community members in interactive ways and in different formats. This helps different groups understand their rights.

# Materials:

■ Flip chart and markers (as needed)

# 8.1 KEY MESSAGES ACTIVITY, 60 MINUTES

#### **Exercise**

# **Purpose**

Participants know the key messages they will share with community members about safeguarding

#### **Process**

ASK the participants:

- What are the key messages you learned from this training that you will share with community members?
- What will you take away from this training?

**DISCUSS** answers in plenary.

**ASK** participants to review the key messages on the *rights and entitlements* handout that they received previously (<u>HO 25</u>). **EXPLAIN** that this handout has the key messages that Safeguarding Agents should share with community members.

**DIVIDE** participants into four groups. **ASSIGN** one section of the key messages handout to each group. **ASK** groups to come up with an interactive way to share their key messages with community members—such as a role-play, a song or a game.

**GIVE** groups 30 minutes to create a presentation/role-play or activity that explains their key messages. **ASK** each group to share or perform the key messages for the rest of the participants.

#### **Debrief**

■ It is important to share key messages with community members in interactive ways and in different formats. This helps different groups understand their rights.

# **Session 9: Closing**

# Time:

■ 30 minutes

# Objective:

Participants review what they have learned

# Key Message:

Describe and communicate about safeguarding using everyday language that suits the context and is easy to understand.

# Materials:

Flip chart and markers

# 9.1 TAXI PITCH, 20 MINUTES

#### **Exercise**

#### **Purpose**

To review key learnings from the training

#### **Process**

**DIVIDE** participants into pairs. **GIVE** them the following scenario:

You are in a taxi with a local government representative and have 60 seconds to explain safeguarding and your role as a community Safeguarding Agent to them.

**GIVE** the pairs 10 minutes to prepare their 60-second message. **REMIND** teams that their "pitch" should be clear and brief. It should use simple language so that the local government representative can understand it in the time that a short taxi journey would take.

 $\label{lem:emphasize} \textbf{EMPHASIZE} \ that \ participants \ must \ be \ careful \ to \ avoid \ jargon \ or \ acronyms.$ 

After 10 minutes, **ASK** each group to deliver their taxi pitch to the group.

**DISCUSS** the pitches. **WRITE** the names of each pair on a flip chart and **ASK** participants to vote for their favorite by putting a dot next to the names.

#### **Debrief**

■ Talk about the pitch or phrases that people voted for and highlight why they are useful for describing safeguarding.

# 9.2 FINAL CLOSING, 10 MINUTES

#### Presentation

ANSWER any last questions that participants have.

**THANK** participants for participating and make sure that it is clear to them what follow-up and support are available.

# **Handouts and Training Tools**

# HO 25: Key Messages on Rights and Entitlements

# **HANDOUT 25. KEY MESSAGES ON RIGHTS AND ENTITLEMENTS**

#### Your rights to emergency assistance and services are always free

- The types of assistance and services you get are based on your needs.
- No one should use their power to control you or your community.
- If any services are not free, the government or organization should clearly say the reason why and the fee amount.
- It is never okay if people working for organizations or local governments abuse their power, harm you or treat you inappropriately. For example, no one should ever ask you for favors in exchange for assistance or services.

# Your right to information

- You have the right to be told about the assistance and services available to you.
- You have the right to know how people are chosen to get assistance or services (this is called "selection criteria").
- You have the right to ask questions and raise concerns about the assistance or services you get. Raising any concerns will not affect your right to assistance and services.

# You have the right to be safe and be respected

- The people giving assistance/services who work for organizations and local governments:
  - Should always treat you with respect and dignity
  - Should always keep you safe from harm
  - Should never ask you for any kind of sexual favor in exchange for assistance or services
  - Should never harm, hurt or abuse you
  - **Should never** have any sexual contact or relationships with you, other people getting assistance or services, or with anyone under 18 years of age
- If any of these rules are broken, please report this to someone. This will help keep you and other people safe.

#### Has a person who gave assistance harmed, hurt or abused you or someone else?

- If anyone hurts or harms you, it is never your fault. It is the responsibility of organizations and local governments to keep you safe and treat you with respect and dignity.
- You have the right to make a complaint and report this person in a safe and private way. Your safety is the priority! All complaints are kept confidential and private.
- You have the right to get a response to your complaint or concern.
  - Do you want to make a complaint about a person who gave you assistance or services who works for an organization or local government? Report it to [insert reporting mechanisms].
  - It is important to make a complaint. You may be the only person to speak up. You may be the only person to help yourself or others.

# Do you need support after being harmed, hurt or abused?

- It is important to get support. You can contact [insert name of organization or local government]. There you can get more information about people who can support you.
- Seek medical attention immediately if you experience sexual abuse. You deserve care and support.

# HO 26: IASC Six Rules

#### **HANDOUT 26. IASC SIX RULES**

Adapted from IASC Six Core Principles Plain English Version, IASC Six Core Principles | IASC/PSEA (interagencystandingcommittee.org) (2019).

# Rules on sexual conduct for humanitarian workers:

- Humanitarian workers can be disciplined—even fired—for unacceptable behavior in relation to sex.
- Humanitarian workers are not allowed to have sexual relationships with anyone under the age of 18, even if it is legal in their country. Saying they did not know the person's true age is not a valid excuse.
- Humanitarian workers are not allowed to pay for sex with money, employment, goods or services—including goods and services intended as aid to people in need. They must not use promises of these things to make other people accept any kind of behavior that humiliates or exploits them. This includes paying or offering money for sex with a prostitute.
- Humanitarian workers who might affect who gets goods and services must not have sex with anyone who may get that help. If they do, it destroys trust in the work.
- If a humanitarian worker is worried or suspects that anyone in their organization or another aid organization may be breaking humanitarian rules on sexual conduct, they must report it, following procedures set up by their agency.
- Humanitarian workers must create and maintain a work environment which prevents unacceptable sexual behavior and encourages staff to behave as set out in their codes of conduct. All managers are responsible for supporting and developing systems which maintain this environment.

# HO 27: Example of Code of Conduct Template

#### HANDOUT 27. EXAMPLE CODE OF CONDUCT TEMPLATE

OVERVIEW	
Purpose	This tool is an example template with various sections that a simple Code of Conduct could cover.
When to use? During the development of a Code of Conduct in a consultative process	
How to use?	The Checklist (Tool 1) can be used to help actors develop and adapt the content in each section of the Code of Conduct template (Tool 2), which should be based on each actor's existing code of ethics and guiding principles. The process for developing the code should be consultative and involve diverse organization members.
Who to involve?	Senior management, programs teams or field staff, Human Resources and operations staff

# Introduction: purpose and scope of the Code of Conduct

- In line with its values, [insert organization] is committed to ethical conduct among all its staff members and to provide a safe environment for all staff and community members free from discrimination, abuse and harassment.
- The purpose of the Code of Conduct is to set clear expectations about the duty to treat all people with respect and prevent all forms of abuse and exploitation.
- These policies apply to all staff, including: [insert staff, volunteers, contractors, partners, other affiliates].
- The Code is always applicable and mandatory. This includes when staff members are at work, outside of work and while on leave.
- Breaches of the Code of Conduct are grounds for appropriate disciplinary action, up to and including dismissal.

# Organization's values and guiding principles

Our organization is committed to upholding the following values and guiding principles:

[INSERT VALUES AND PRINCIPLES KEY TO THE ORGANIZATION, SUCH AS TREATING ALL PEOPLE WITH DIGNITY AND RESPECT.]

#### Example:

- I will treat all staff and community members with dignity and care
- Prohibited behaviors

taff members:
[INSERT THE PROHIBITED BEHAVIORS TOWARDS PROGRAM PARTICIPANTS, COMMUNITY MEMBERS BENEFITTING FROM ASSISTANCE AND SERVICES, AND STAFF THAT COVER DISCRIMINATION, EXPLOITATION, ABUSE, AND HARASSMENT.]
kample:
I will not harass other staff members including sending inappropriate messages or photos.  I will not emotionally abuse another child or adult.
rotection against sexual exploitation and abuse Il staff must uphold the following rules:
xample:
I will not exchange money, employment, goods or services for sex—including sexual favors. This includes:
<ul> <li>Purchasing sex</li> <li>Exchange of assistance or services due to program participants</li> </ul>
[INSERT OTHER AREAS THAT MAY NOT BE INCLUDED IN THE ABOVE—SUCH AS USE OF ORGANIZATIONAL RESOURCES; FRAUD, BRIBERY AND CORRUPTION; CONFIDENTIALITY AND DATA PROTECTION; POLITICAL ACTIVITY; SAFETY AND SECURITY.]
Other prohibited behaviors

The following behaviors are prohibited by all staff towards program participants, community members and other

Example:

■ I will not use any organizational funds for personal gain.

[INCLUDE INFORMATION ON STAFF OBLIGATION TO REPORT AND HOW TO REPORT ANY COMPLAINTS.]	
Mandatory reporting	
<ul> <li>Example:</li> <li>Staff receiving reports or concerns are obliged to act or refer the concern immediately as per the following procedures:</li> <li>Complaints reporting information: [insert a summary of how complaints are reported]</li> </ul>	
[INCLUDE STATEMENTS ACKNOWLEDGING THAT STAFF HAVE READ AND UNDERSTOOD THE CODE.]	
Declaration: receipt and acknowledgment	
Example:  I acknowledge that I have read and understood the Code of Conduct and commit to upholding the behaviora conduct	ıl
Signature:	
Date:	
Location:	

# HO 28: WHO Psychological First Aid Pocket Guide

#### HANDOUT 28. WHO PSYCHOLOGICAL FIRST AID POCKET GUIDE

Please refer to the World Health Organization (WHO). <u>Psychological first aid: Guide for field workers</u>. 2011. Other languages are available.

#### What is PFA?

Psychological First Aid (PFA) describes a humane, supportive response to a fellow human being who is suffering and who may need support. Providing PFA responsibly means:

- Respect safety, dignity and rights
- Adapt what you do to take account of the person's culture
- Be aware of other emergency response measures
- Look after yourself

#### **Prepare**

- Learn about the crisis event
- Learn about available services and supports
- Learn about safety and security concerns
- Apply PFA as needed:



#### Look

- Check for safety
- Check for people with obvious urgent basic needs
- Check for people with serious distress reactions



#### Listen

- Approach people who may need support
- Ask about people's needs and concerns
- Listen to people and help them feel calm



# Link

- $\blacksquare$  Help people address basic needs and access services
- Help people cope with problems
- Give information
- Connect people with loved ones and social support

# **ETHICS**

Ethical dos and don'ts are offered as guidance to avoid causing further harm to the person, to provide the best care possible and to act only in their best interest. Offer help in ways that are most appropriate and comfortable to the people you are supporting. Consider what this ethical guidance means in terms of your cultural context.

DOS	DON'TS
■ Be honest and trustworthy.	■ Don't exploit your relationship as a helper.
Respect people's right to make their own decisions.	■ Don't ask the person for any money or favor for
■ Be aware of and set aside your own biases and	helping them.
prejudices.	■ Don't make false promises or give false information.
■ Make it clear to people that even if they refuse help	■ Don't exaggerate your skills.
now, they can still access help in the future.	Don't force help on people and don't be intrusive or
Respect privacy and keep the person's history	pushy.
confidential, if this is appropriate.	■ Don't pressure people to tell you their story.
■ Behave appropriately by considering the person's	Don't share the person's story with others.
culture, age and gender.	Don't judge the person for their actions or feelings.

# People who need more than PFA alone

Some people will need much more than PFA alone. Know your limits and ask for help from others who can provide medical or other assistance to save life.

# People who need more advanced support immediately:

- People with serious, life-threating injuries who need emergency medical care
- People who are so unwell that they cannot care for themselves or their children
- People who may hurt themselves
- People who may hurt others

# TT 20: Power Walk Characters

# TRAINING TOOL 20. POWER WALK CHARACTERS

Adapted from CWS, Putting Dignity First (2009).

14-YEAR OLD GIRL WITH 9 SIBLINGS IN A DROUGHT-AFFECTED COMMUNITY  75-YEAR-OLD MALE SUBSISTENCE FARMER WITH A WIFE AND 6 CHILDREN LIVING IN A REGION OF ETHNIC CONFLICT		RELIGIOUS LEADER WORKING IN A PEACEFUL COMMUNITY	15-YEAR-OLD FEMALE HEAD OF HOUSEHOLD IN A RURAL VILLAGE WITH TWO YOUNGER SISTERS
14-YEAR-OLD SECOND WIFE OF POLYGAMOUS HUSBAND	REFUGEE FROM A NEIGHBOURING COUNTRY	22-YEAR-OLD FEMALE WITH A DISABILITY	MALE POLICE OFFICER
PERMANENTLY DISABLED SURVIVOR MEMBER OF OF A LANDMINE PARLIAMENT EXPLOSION		45-YEAR-OLD WIDOW WITH 6 CHILDREN	NGO EMPLOYEE (EXPATRIATE STAFF)
INTERNALLY DISPLACED PERSON DOCUMENTATION		NGO EMPLOYEE (LOCAL STAFF)	SUCCESSFUL MALE BUSINESS OWNER
17-YEAR-OLD HIV- POSITIVE BOY LIVING ON THE STREETS OF A LARGE CITY  16-YEAR-OLD SINGLE MOTHER AND SEX WORKER		10-YEAR-OLD BLIND GIRL IN AN ORPHANAGE	HUMANITARIAN WORKER WITH THE UNITED NATIONS

# True

# False

# TT 22: Exploitation and Abuse Case Studies

#### TRAINING TOOL 22. EXPLOITATION AND ABUSE CASE STUDIES

From IASC Saying No to Sexual Misconduct, 2020 and Interaction PSEA Basics Training Guide (2013)

**Case study 1:** Mr. Sanjit is a local driver contracted by the local government office that responds to disasters. He likes to talk about how he had sex with some of the program participants at the distribution site, particularly the young pretty ones.

Case study 2: Knowing that prostitution is legal in the local region, Mr. Shin offers to give money to a program participant in exchange for sexual favors. Mr. Shin works for an international NGO that is providing aid after disasters.

**Case study 3:** A driver for an international agency regularly provides rides in the official vehicle to village schoolboys traveling to school in a neighboring town, in exchange for him taking photographs of them posing naked.

**Case study 4:** A local DRR committee volunteer touches a teenage girl inappropriately while conducting community disaster risk reduction planning workshops.

# TT 23: Exploitation and Abuse Scenarios

TRAINING TOOL 23. EXPLOITATION AND ABUSE SCENARIOS

**Example 1:** A refugee, who is employed by a local humanitarian organization, lures a female refugee collecting food to a warehouse. He rapes her, saying he will tell her husband they are having an affair if she reports the case.

**Example 2:** A head teacher at a school, employed by the government, refuses to allow a displaced child to enter his school unless her mother has sex with him.

# TT 24: Examples of Code of Conduct Breaches TRAINING TOOL 24. EXAMPLES OF CODE OF CONDUCT BREACHES

Cut these out	Cı	ιt	th	iese	e o	ut
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A male team member comments on a "pretty girl" during an earthquake drill.
There are rumors that a project staff member added his girlfriend's name to the list of program participants.
A program participant in your disaster risk reduction preparedness project is told she must have sex with a contracted vendor to get her home repaired.
A male volunteer meets a 16-year-old female program participant in a bar for a drink and takes her to his house for sexual intercourse.

**Scenario 1:** Mr. Abel works for a local NGO and is planning a distribution of items to people affected by flooding. You are a community leader. You are not on the list because you did not lose anything in the flood. Mr. Abel tells you that if you pay him some money [insert local amount], he will add you to the list and you can also receive a kit. He asks you not to tell anyone about this.

**Scenario 2:** You are the community focal point for women's affairs and a female community member approaches you. She tells you that a local government officer named Mr. Hasan made her have sexual intercourse with him in exchange for food aid being distributed. The female community member is very upset.

# TRAINING TOOL 26. REFERRAL WEB NAMETAGS

Adapted from: Caritas Australia, CRS, Trócaire, CAFOD. <u>Protection Mainstreaming Training</u>. 2018.

# **Cut these out**

17-year-old girl (gender-based violence survivor)	Police officer
Court prosecutor	Lawyer
Community leader	Doctor
Nurse	Local community services worker
UNHCR Protection Officer	UNHCR Community Services Officer

#### TRAINING TOOL 27. REFERRAL OF PROTECTION CASES

This list is not exhaustive. Please expand and adjust according to context.

# **TT 8: Referral of Protection Cases**

#### Use if you are informed of a protection incident (violation of rights, gender-based violence, etc.) NO REFERRAL WITHOUT explicit consent, except: 1. Provide a safe and caring environment for the survivor and 1. When there is a threat to the life of the survivor respect his/her wishes and the 2. When a survivor threatens to cause serious harm to another person principle of confidentiality. 3. In case of suspicion of abuse or neglect towards a child and in child's best interest 2. Ask what are his/her immediate needs. In the event of rape, inform the victim of the importance of accessing medical care within 72 hours. 3. Provide clear and honest If the survivor agrees and requests, ask for his/her informed consent and carry out referrals and support information about available services. for accesssing services. If the survivor has given consent, the immediate response Sexual violence Physical violence Safety risk Psychological violence Hospital or Healthcare NGO Police Counselling/Mental health care What services are available? SGBV ORGANIZATION ORGANIZATION Point focal: Name, contact details (phone/email) Point focal: Name, contact details (phone/email) Services provided: Services provided: Target group: Target group: Opening hours: Opening hours: Languages services provided in: Languages services provided in: MHPSS ORGANIZATION ORGANIZATION Point focal: Name, contact details (phone/email) Point focal: Name, contact details (phone/email) Services provided: Services provided: Target group: Target group: Opening hours: Opening hours: Languages services provided in: Languages services provided in: Health/Nutrition ORGANIZATION ORGANIZATION Point focal: Name, contact details (phone/email) Point focal: Name, contact details (phone/email) Services provided: Services provided: Target group: Target group: Opening hours: Opening hours: Languages services provided in: Languages services provided in: Protection and Legal ORGANIZATION ORGANIZATION Point focal: Name, contact details (phone/email) Point focal: Name, contact details (phone/email) assistance/advice Services provided: Services provided: Target group: Target group: Opening hours: Opening hours: Languages services provided in: Languages services provided in: Education ORGANIZATION ORGANIZATION Point focal: Name, contact details (phone/email) Point focal: Name, contact details (phone/email) Services provided: Services provided: Target group: Target group: Opening hours: Opening hours: Languages services provided in: Languages services provided in: WASH ORGANIZATION ORGANIZATION Point focal: Name, contact details (phone/email) Point focal: Name, contact details (phone/email) Services provided: Services provided: Target group: Target group: Opening hours: Opening hours: Languages services provided in: Languages services provided in:

Adapted from: Lee A, Newman S, Pasztor G, Sutton K. <u>Protection Mainstreaming Training Package</u>. Global Protection Cluster; 2014.

Ask the woman if she is hurt.	Ask for details of what happened.
Ask survivor for details of when and where it happened.	Ask who is responsible for attacking her.
Ask what specific help/assistance she needs. Ask if she is happy for you to contact someone to get support or help.	Give the person contact information for health, counselling or other relevant services.
Don't say anything at the time, but later call the police from somewhere private.	Report the incident to your manager or protection staff member and ask for advice.
Do nothing if it is a domestic or family/community matter.	Check safety: your safety, the safety of other staff members and the safety of the affected person and the community.

# TT 29: Dos and Don'ts of Psychological First Aid

#### TRAINING TOOL 29. DOS AND DON'TS OF PSYCHOLOGICAL FIRST AID

Adapted from: World Health Organization. <u>Psychological first aid: Guide for field workers</u>. 2011. Other languages are available.

# **DOs**

- Be honest and trustworthy.
- Respect people's right to make their own decisions.
- Be aware of and set aside your own biases and prejudices.
- Make it clear to people that even if they refuse help now, they can still access help in the future.
- Respect privacy and keep the person's story confidential, if this is appropriate.
- Behave appropriately by considering the person's culture, age and gender.

# **DON'Ts**

- Don't exploit your relationship as a helper.
- Don't ask the person for any money or favor for helping them.
- Don't make false promises or give false information.
- Don't exaggerate your skills.
- Don't force help on people and don't be intrusive or pushy.
- Don't pressure people to tell you their story.
- Don't share the person's story with others.
- Don't judge the person for their actions or feelings.

# PART 4: LESSONS LEARNED AND EMERGING BEST PRACTICES

# **Summary**

**Part 4** details case studies from the project—including lessons learned on embedding Safe and Dignified Programming approaches in preparedness and response work.

NOTE: To toggle between pages, CTRL/Click on underlined text; to return, press ALT/back arrow.

# List of the Tools

NUMBER OF TOOL	NAME OF TOOL	PURPOSE	COMPRISES
PART 4: Le	essons learned and emerging best	practices	
4.1	Needs Assessment	To share lessons learned about common gaps in Safe and Dignified Programming in contexts vulnerable to natural disasters	
4.2	Sierra Leone	To share lessons learned about embedding Safe and Dignified Programming	
<u>4.3</u>	Sierra Leone	To share lessons learned about mapping services and developing referral pathways	
4.4	Philippines	To share lessons learned about how to embed Safe and Dignified Programing in the CLDRM+ process	
4.5	Philippines	To share lessons learned about developing local codes of conduct	
4.6	Uganda	To share lessons learned about setting up and improving feedback mechanisms	

# Part 4: 4.1 Global: Common Gaps and Needs for Safe and Dignified Programming in Contexts Vulnerable to Natural Disasters

Catholic Relief Services (CRS) conducted a detailed needs assessment before the United States Agency for International Development (USAID)/Bureau for Humanitarian Assistance (BHA)-funded *Preparing to Enhance Protection in Disasters (PrEPD)* project started. The assessment looked at safe and dignified programming in disaster preparedness and response activities in the pilot countries (the Philippines, Sierra Leone and Uganda) and at the global level. It highlighted common priorities, perspectives, needs and capacities that may be relevant in other contexts.

CRS conducted key informant interviews (KIIs). At the global level, respondents included representatives of the United Nations High Commissions for Refugees (UNHCR), Caritas Internationalis, the Core Humanitarian Standard (CHS) Alliance and United Nations Office for Disaster Risk Reduction (UNDRR). At the country level, there were KIIs with eight organizations in the Philippines, seven in Sierra Leone and four in Uganda. A secondary data review examined the gap in safe and dignified programming in disaster preparedness and response work at the global and national levels.

# What were the needs?

The assessment found that in the urban areas targeted in the **Philippines**, informal settlements with diverse religious and ethnic makeups were particularly vulnerable to disasters. Data after Typhoon Pablo in 2012 and Typhoon Yolanda in 2013 showed an increase in sexual and gender-based violence (SGBV). Older people and people with disabilities were also identified as particularly at-risk because of their limited mobility. In Manila, the needs assessment found that the urban poor face eviction and relocation issues. Women, children and youth faced sexual violence, harassment and abuse (including online sexual exploitation), while informal workers navigated unfair labor practices.

In **Sierra Leone**, the assessment found that rapid population growth in Freetown had forced vulnerable and low-income communities to settle in high-risk areas—such as low-lying coastal locations, river channels and deforested upper catchment areas. Flooding, fires and other disasters frequently displaced people and communities. This was disrupting already precarious livelihoods and decimating assets and resources.

In **Uganda**, the findings highlighted that vulnerable groups—including young children and older people—were particularly affected by floods and landslides due to their limited mobility during evacuation. This led to high psychological trauma. Multiple sources highlighted the increased risk of SGBV as communities and family structures were disrupted or displaced by disasters.

# Unaddressed safe and dignified programming needs during disasters

According to respondents in Sierra Leone and Uganda, **community engagement** was not meaningful or inclusive. Consultations with communities can be rushed, with insufficient attention to the needs of children, women, youth, older people, people with disabilities and people with chronic diseases. Communities do not know what they can expect from humanitarian actors and the lack of engagement and information does not create trust between humanitarian responders and affected communities.

Mapping of protection services and information on referrals were raised as gaps in all the countries involved in the project, and at the global level. The capacity of Disaster Risk Reduction (DRR) and humanitarian actors to safely orient people to specialized services was raised. A lack of service providers for key protection needs was also seen as a gap. Some global respondents noted that mapping exercises often happen at the national level and overlook community-based protection mechanisms that may meet some needs. This highlighted a barrier linked to the lack of coordination between DRR and protection actors at all levels.

**Feedback mechanisms** were also deemed unsatisfactory by respondents. Where mechanisms existed, they were often inadequate; it was felt that diverse community members were not consulted on their preferred ways to give feedback and make complaints. The mechanisms were not always designed to accept sensitive issues, particularly those related to abuse and exploitation, or to accommodate speakers of marginalized languages and non-literate informants. Managing and responding to feedback and complaints was not systematic and there was a lack of coordination between actors to refer feedback and share trends. Affected communities did not know if any action was taken because of their feedback, which contributed to a lack of trust between communities and humanitarian responders.

# Community knowledge of rights and entitlements

Community knowledge of rights and entitlements in humanitarian response varied across the pilot countries. In the **Philippines**, communities frequently exposed to humanitarian activities were more aware than those who were not. In **Uganda**, communities generally lacked information on rights and entitlements, resulting in the underutilization of services and discouraging participation. Global respondents emphasized the need for better information-sharing and community engagement. They felt humanitarian organizations make too many assumptions about what people know and do not share messages in accessible languages and formats.

The assessment found that affected communities did not know the most basic information or where to access trusted, accurate information. This issue was worse for marginalized and excluded groups, who in some contexts may be perceived as not having any rights. Communities' understanding of rights and entitlements was seen by global respondents as essential to improving accountability of humanitarian actors and reducing safeguarding issues.

#### Coordination gaps

Coordination across key stakeholders was a challenge in all target locations and at the global level. In the **Philippines**, local partners noted that networking was weak. In **Sierra Leone**, respondents said that coordination between the national and local levels was fragmented. There were no systematic coordination for a in **Uganda**, and gaps between national and subnational levels were highlighted as a feature of the context. This was understood to contribute to a top-down planning model with communities placed only on the receiving end, rather than participating in a meaningful way.

Global respondents painted a similar picture, noting that DRR, protection and humanitarian stakeholders work separately and do not share information or plan and prioritize as a collective. Competition between actors was also felt to prevent effective coordination, as organizations vie for funding. The UN system is difficult for local actors to navigate because of language issues, geographic proximity and power dynamics between international and local organizations. A lack of effective coordination skills was also an issue, as softer skills that build consensus and foster participation are not prioritized.

# Recommendations to support safe and dignified programming

Different stakeholders in the PrEPD project identified various ways of ensuring DRR actors embed safe and dignified programming across their policies, strategies and practice. These included:

	OBSERVATIONS	RECOMMENDATIONS TO ENABLE SAFE AND DIGNIFIED APPROACHES
Lack of capacity	Lack of capacity of local disaster management structures (including district and village level committees) on safe and dignified programming	<ul> <li>Capitalize on high levels of interest in learning.</li> <li>Provide more opportunities for training and support on safe and dignified programming to a range of actors—including local disaster management committees.</li> </ul>
Protection risk analysis	A lack of understanding of protection risks by local DRR actors—including misconceptions on what constitutes harm, abuse or exploitation	<ul> <li>Build capacity and provide tools for protection risk analysis.</li> <li>Ensure focal points at the local/district level integrate protection analysis processes into the Disaster Risk Reduction and Management (DRRM) processes.</li> <li>Share key findings of protection analysis with focal points throughout project implementation.</li> </ul>
Excluded groups	The exclusion of vulnerable groups from emergency preparedness and response planning—including women, children, people with disabilities, etc.	<ul> <li>Provide safe and dignified programming training to local DRR actors.</li> <li>Combine the use of specific tools—such as the Community-Led Disaster Risk Management (CLDRM+)—with activities to raise awareness on rights and entitlements in communities.</li> <li>Include diverse groups in the community consultation activities and throughout the implementation of the preparedness and response plans—including through support for participation in local languages.</li> </ul>
Referral pathways	Unwritten, incomplete or unknown referral pathways resulting in few people being referred for support	<ul> <li>Support local authorities to consolidate the different pathways to services (where these exist) into a single one-stop-shop document.</li> <li>Identify ways to continue capacity building activities, even after an emergency.</li> <li>Map and contact protection actors at the community levels to understand what, if any, referral pathways exist. Ensure those leading the disaster risk reduction and management processes have information about these referral pathways.</li> </ul>
Design of feedback mechanisms	Lack of community consultation when designing feedback mechanisms	<ul> <li>Consider whether existing feedback mechanisms/channels are safe and inclusive.</li> <li>Build the capacity of staff/actors to create community awareness of rights and entitlements.</li> <li>Consult different groups on their preferences and ability to access different feedback channels. (consider literacy, language, access to the internet, phones and/or phone credit, etc.).</li> </ul>

	OBSERVATIONS	RECOMMENDATIONS TO ENABLE SAFE AND DIGNIFIED APPROACHES
Use of feedback mechanisms	Lack of awareness of feedback mechanisms and referral pathways in the community meaning many cases of abuse are not being reported	<ul> <li>Support local DRR actors to set up multiple feedback channels by giving financial and technical support, as well as ongoing training and accompaniment.</li> <li>Include diverse groups in the community in the choice, design and update of feedback mechanisms.</li> <li>Promote the best practice of setting up multiple channels and supporting feedback in local languages.</li> <li>Where appropriate, consider how to promote interagency feedback mechanisms.</li> <li>Develop and use communication materials on feedback channels with the community.</li> <li>Develop simple referral pathways that staff can use to orient survivors to appropriate services.</li> </ul>
Security	Lack of security and general rise in criminality—including thefts, fights and increased drug and alcohol abuse	<ul> <li>Consult communities on protection gaps and accountability needs.</li> <li>Consider including and prioritizing Psychological First Aid training for all responders—including those working on feedback mechanisms (such as help desks and hotlines).</li> </ul>
Coordination	Lack of awareness of protection coordination mechanisms, and/or poor mobilization and coordination by DRR actors, leading to safe and dignified programming approaches being overlooked and the marginalization of community disaster committees from responses	<ul> <li>Support local DRR actors to coordinate with local protection actors—including through the protection cluster where relevant—on services and best practices.</li> <li>Support local authorities to address coordination gaps and make meetings efficient and productive.</li> <li>Consider DRR coordination meetings at the community level.</li> <li>Use the tools—such as the referral pathway—to explore and develop links with protection actors at multiple levels.</li> </ul>

# Part 4: 4.2 Sierra Leone: Embedding Safe and Dignified Programming

In 2019, Sierra Leone declared an emergency due to rape and sexual assault and a national strategy was developed in response. <sup>52</sup> However, this strategy has minimal focus on the increased risks during a time of crisis or displacement. Rapid population growth in Freetown has forced vulnerable and low-income communities to settle in high-risk areas—such as low-lying coastal locations, river channels and deforested upper catchment areas. <sup>53</sup> In the informal settlements of Cockle Bay and Kolleh Town, women and girls face high levels of sexual and gender-based violence (SGBV)—including sexual exploitation, abuse and intimate partner violence. Experience from across the humanitarian sector tells us that existing protection risks—particularly forms of SGBV—increase during emergencies because of the increased stress and uncertainty.

The Ministry of Social Welfare and Ministry of Gender and Children's Affairs recognized the need for capacity strengthening on safe and dignified programming. They expressed a desire to create and strengthen linkages with District Disaster Management Committees (DDMCs) and the Community Disaster Management Committees (CDMCs) to support them on safe and dignified programming.

# Local government structures as entry points for safe and dignified programming

As part of the United States Agency for International Development (USAID)/Bureau for Humanitarian Assistance (BHA)-funded project *Preparing to Enhance Protection in Disasters* (PrEPD), staff members in Catholic Relief Services' (CRS) Sierra Leone country program identified the CDMCs in Cockle Bay and Kolleh Town as key stakeholders. The CDMCs are made up of volunteer community members. They were invited to participate in capacity-strengthening activities aimed at embedding safe and dignified programming in disaster risk reduction and management (DRRM) planning.

CRS began by engaging with existing government and non-governmental structures that were key in setting up the CDMCs. This included the Centre of Dialogue on Human Settlement and Poverty Alleviation (CODOHSAPA), the Federation of Urban and Rural Poor (FEDURP), Freetown City Council (FCC) and the National Disaster Management Agency (NDMA). To build relationships and capacities, CRS employed the following approaches:

- Capacity assessment and improvement plan
- Share tools and conducting Training of Trainer (ToT) events so that government, disaster risk reduction (DRR) and humanitarian staff could co-facilitate sessions on safe and dignified programming
- Include government, DRR and humanitarian staff in the PrEPD project's monthly planning and coordination meetings
- Support NDMA to strengthen coordination mechanisms with the CDMCs
- Support the FCC through the Tony Blair Institute (TBI) to develop a concept note and budget for additional CDMC activities

Intentional collaboration with these local and central government structures set the stage for effective engagement with CDMCs. This is because in the context of Sierra Leone, DRR requires strategic policies and joint interventions to achieve success. Follow-up activities with CDMCs included community consultations on protection gaps and risks. They consulted diverse groups about their communication preferences for feedback mechanisms. They also jointly developed referral pathways using the Developing Referral Pathways for Essential Protection Services Tool.

<sup>&</sup>lt;sup>52</sup> Ministry of Gender and Children's Affairs. (2020). <u>National Male Engagement Strategy for the Prevention of SGBV in Sierra Leone, Ministry of Gender and Children's Affairs.</u>

<sup>&</sup>lt;sup>53</sup> World Bank. (2018). Sierra Leone Multi-City Hazard Review and Risk Assessment Final Report (Volume 2 of 5): Freetown City Hazard and Risk Assessment.

This was a new approach for the CRS team as their focus was on existing government and community structures as opposed to local non-governmental organizations NGOs that usually serve as CRS' on-the-ground implementers.

# Lessons for working with local government structures

- Focus on strengths, not just gaps. The project team found that starting with a capacity assessment was an effective approach in engaging local government bodies. Gaps identified included a lack of structured leadership on safe and dignified programming, clear terms of reference (ToR) and concrete guiding principles. These findings were discussed and resulted in a meaningful improvement plan. At the same time, the capacity assessment highlighted two key strengths that were critical to the project: in-depth knowledge of the local context and relationships with existing community structures.
- Prioritize community consultations. Community consultations are critical for developing tools and interventions that are relevant to communities' needs. It is through these consultations that the project team and local structures with which they partnered were able to identify the unique needs of the vulnerable groups, who had previously been excluded from disaster risk reduction and management activities. The Community-Led Disaster Risk Management (CLDRM+) provided tools and templates for this purpose that proved highly effective in this context.
- Strengthening existing community structures is an effective approach. DRR and humanitarian actors sometimes fail to engage existing community structures because they are perceived to lack capacity. In some cases, they even opt to set up new structures that at best duplicate existing structures and at worst undermine them. This persists even though it is often these community structures that are the first responders during disaster events. As a result, community members may not be involved in decisions that affect them. By strengthening the capacities of existing groups, community members who know their contexts, strengths and needs can serve as strong and capable leaders in times of crisis. All disaster risk reduction and management programs should engage and strengthen existing community structures.
- Include community structures in training on safe and dignified programming. Although the content of safe and dignified training can be both heavy and taboo in some contexts, it is critical not to shy away for delivering these trainings to those closest to—or even coming from—affected populations. Having an in-depth understanding of the concepts underpinning safe and dignified programming helps community structures identify protection risks and mitigating measures.
- Enhancing coordination between groups is critical to achieving results. Community structures noted difficulty in producing results when working in isolation. After increasing the linkages between CDMCs and existing local DRRM actors—and strengthening the capacity of both—project staff observed notable results. CODOHSAPA/FERDUP had an in-depth understanding of the local context as well as relationships with CDMCs. Together, they were able to strengthen communities' trust in disaster preparedness and response strategies. Further, the project team expects the results of the project to be more sustainable. Local actors, who will outlast the project, are now equipped with the knowledge, skills and infrastructure to respond to disasters.

# Part 4: 4.3 Sierra Leone: Mapping Services and Developing Referral Pathways

The Cockle Bay settlement of Freetown, Sierra Leone suffers from overcrowding, sub-standard housing and lack of access to safe water and sanitation. Households in these communities face natural and human-made hazards including floods, landslides, tropical storms, coastal erosion, fires, smoke pollution and epidemics. As a result of these conditions and events, many face further poverty after a crisis because of the disruption to livelihoods and loss of life and assets. The most vulnerable groups—including older people, people with disabilities and female-headed households—are disproportionately affected.

Fire is one of the most frequently occurring disasters and it struck the Kola Stick Zone of Cockle Bay on October 17, 2022. Three homes were destroyed displacing 60 men, women and children. Seven nearby homes suffered damage. In the wake of the fire, looters stole most of the belongings of the already vulnerable families. Individuals affected by the fire—especially women and adolescent girls—further faced protection risks including sexual exploitation and abuse.

# Mapping referral pathways to essential services

Catholic Relief Services (CRS') *Preparing to Enhance Protection in Disasters (PrEPD)* project included the mapping of local services and development of safe referral pathways for families and individuals in need. While there are many service providers in Freetown, the project team observed that many work in isolation. They do know where to orient people needing services that fall outside the scope of their own work. Government Ministries, Departments and Agencies that are mandated to map service providers and circulate this information are not always effective. This makes the provision of services to crisis-affected households unnecessarily difficult. Emergency first responders are often left scrambling to quickly identify appropriate providers *after* a disaster. Delays in receiving essential services can cause additional harm to survivors.

The project addressed this by providing tools and training. This included step-by-step instructions in the 2.3 <u>Developing a Referral Pathway for Essential Protection Services</u>. Before the fire, the project team had worked jointly with the Federation of Rural and Urban Poor and the local Community Disaster Management Committee (CDMC) to fill the gap. Together they mapped essential service providers and documented their services, areas of operation and contact information. They developed referral pathway cards with this information and distributed them to local actors.

#### Real-world results

The referral cards were invaluable after the Kola Stick Zone fire. When the fire started, the CDMC quickly alerted authorities using the contact information on the referral pathway card. When firefighters were not able to reach the scene because of the road conditions, CDMC volunteers and local youth stepped in to put out the blaze. The next morning, the CDMC used the referral pathway cards to bring other local disaster risk reduction (DRR) actors to the site to assess the damage and identify survivors' needs. One actor—the National Disaster management Agency (NDMA)—led the assessment and called an emergency meeting of local DRR actors and service providers. This helped with coordination and making sure services were not duplicated.

#### As a result:

- Temporary shelters were found for the displaced households that were gender-segregated. This addressed a protection risk that had been previously identified.
- Psychosocial support was given to survivors.
- Neighbors donated food and clothing.

The communities' support for the affected households was significant. Feedback highlighted the role of the CDMC and project team before the fire in identifying capacities in the community and raising awareness. The NDMA-led rapid needs assessment, that was started at the request of the CDMC, laid the groundwork for a situation report and \$65,000 appeal that was later approved.

#### Lessons learned

The response to the fire in Cockle Bay highlights the importance of developing accurate and safe referral pathways before a disaster. It also shows that with the right knowledge and tools, community-based DRR actors can lead emergency responses. Since they are often closest to the disaster, they are well-placed to be first responders and also community mobilizers. They can also orient survivors to life-saving services. Unfortunately, many interventions still exclude community-based structures because of actual or perceived capacity gaps. Humanitarian projects may

not meaningfully engage with these groups and/or include appropriate capacity-strengthening activities. This can leave community groups working in isolation. This undermines their effectiveness and limits their potential.

Additional takeaways include:

- Service mapping and referral pathways should be developed in advance and updated regularly. By the time a disaster happens, it is too late. The absence of referral pathways or outdated referral pathways slows down outreach activities, limits coordination and can cause further harm to survivors who may need immediate support.
- Coordination results in holistic disaster response. The development of the referral pathways before the fire led to quick outreach to local actors. This meant faster and better coordination during the fire response. The CDMC and NDMA were able to bring together diverse actors to plan collectively, share responsibilities and complement each other's work. This also created a foundation for

"When the fire [began], the CDMC responded immediately by putting down the flames and prevent[ing] escalation to other neighborhoods. We used our referral cards to alert other humanitarian actors that include[d] National Fire Force, FEDURP, CRS, NDMA, etc. for a comprehensive response to the disaster; this yielded the desired result with the help of the accurate contacts."

—ALIEU BAH, CDMC CHAIRPERSON, COCKLE BAY

- continued partnership that will benefit the Cockle Bay communities in the longer term. When local actors from different sectors—DRRM, protection, health, etc.—become familiar with one another and the services they provide, they can use their existing network in times of crisis. The result is a more efficient and effective response that meets all the needs of survivors.
- Mapping services and developing referral pathways can be useful in a range of contexts. The experience of the Cockle Bay CDMC and the Kola Stick Zone fire response demonstrates one way safe and dignified programming can be embedded in disaster preparedness and response activities. This experience may be useful for other service providers and government actors both in humanitarian and development contexts. No organization can be a specialist in all types of risks, needs and services. Actors should coordinate more effectively, regardless of their context, to better serve communities and individuals.

# Part 4: 4.4 The Philippines: Embedding Safe and Dignified Programming in the CLDRM+ Process

Experience from crises around the world shows that vulnerable groups—such as older people, people with disabilities, women and children—are disproportionately affected by natural disasters. The Philippines faces frequent, rapid onset natural disasters—such as typhoons and earthquakes. Those living in densely populated informal urban settlements are particularly vulnerable. Women and girls are especially at risk during evacuations; living in open areas, makeshift shelters, or crowded evacuation centers increases their vulnerability to sexual and gender based violence (SGBV). Older people and people with disabilities experiencing mobility challenges are also particularly at risk. Communication challenges linked to language, literacy or specific impairments can leave some individuals and groups without critical information or less able to access support. This is why a safe and dignified programming approach to disaster preparedness and response is so critical.

# Inclusive and accountable disaster risk reduction and management (DRRM)

The United States Agency for International Development (USAID)/Bureau for Humanitarian Assistance (BHA)-funded *Preparing to Enhance Protection in Disasters (PrEPD)* project was launched in 2021 to explore ways of embedding safe and dignified programming in disaster risk reduction and management. This included adapting and testing existing tools.

One of the tools was a guide that had been developed to support community-led disaster risk management processes. As part of the project, this tool was adapted to bring a great focus on protection and is now known as the <a href="Lackground-color: 1.3 Community-Led Disaster Risk Management + Protection (CLDRM+) Facilitation Guide</a>. This tool provided an important framework for conversations on safe and dignified programming in the Philippines.

# Safe and dignified programming in the Philippines

Catholic Relief Services (CRS) has worked in the Philippines since 1945. In recent years it has implemented disaster risk reduction and emergency response programs in partnership with national and local government units (LGUs), local partners and communities. Since 2019, CRS has implemented the USAID/BHA-funded Supporting Household and LGU Awareness and Knowledge for Earthquake Preparedness (SHAKE) projects. These projects have focused on enhancing resilience to earthquakes in communities of Metro Manila. The SHAKE project provided an ideal opportunity to embed safe and dignified programming.

A needs assessment was conducted in April 2022 to understand the protection and accountability issues during disasters, gaps in institutional stakeholder approaches on safe and dignified programming in disaster risk reduction (DRR), community knowledge about rights/entitlements and coordination gaps between protection and DRR actors.

This assessment picked up on the following gaps and barriers:

- National law does not adequately incorporate protection-responsive guidelines. Legislation in the Philippines focuses on structures, rather than rights and standards, and concentrates on the actions of response actors rather than the concerns of crisis-affected people.
- Protection was not consistently mainstreamed ahead of and during disasters. Local DRR and management committee members in barangays (districts) of Metro Manila are experienced in developing disaster plans. However, protection risks—such as sexual exploitation and abuse—are not explicitly or routinely addressed in these plans. LGUs described challenges in mapping protection issues and referral pathways options. The need to improve risk assessment tools—including protection risks as well as a facilitation guide to encourage discussion around protection risks in disasters—also came up.

■ Disaster risk reduction planning did not sufficiently include people with disabilities and other vulnerable groups. In communities where CRS had implemented community-led disaster risk management programming, people with disabilities were engaged in planning activities. However, there was a clear need to increase and strengthen the inclusion of people with disabilities and other vulnerable groups in all activities.

Using this analysis, CRS developed a plan, taking advantage of SHAKE activities in ten targeted barangays. Staff members from partners—including Caritas Pasig Inc. (CPI) and the Diocese of Malolos Commission on Social Action (MDSAC)—attended a weeklong face-to-face workshop. These sessions aimed to develop the skills of participants to run the same sessions in local communities. They covered the concepts underpinning safe and dignified programming and simulation exercises.

The project team then tested the CLDRM+ tool with participants—including Barangay and City disaster risk reduction and management (DRRM) committee/council members, community Safeguarding Agents and DRRM ambassadors. These sessions also brought in representatives of diverse groups—such as older people, youth, people with disabilities and single heads of household. Project staff documented learning from the workshops in the ten barangays, including direct feedback from participants. Further changes were made to the tools, particularly the CLDRM+, based on the observations and feedback of local partner organizations and LGUs.

"The disaggregated approach helped draw out community needs before, during and after disaster events. It's also a way to detail specific protection issues and gaps that warrant the attention of local and barangay officials, who were also present during the training of trainers sessions."

-CARITAS PASIG, INC. STAFF

# Lessons learned for enhancing safe and dignified programming approaches in DRRM

- Safe and dignified programming is better understood when the concepts are presented in plain language. The team observed that many DRR and local humanitarian actors had limited technical knowledge and skills in safe and dignified programming. This highlighted the need to simplify the concepts, translate them into local languages and contextualize them. By applying plain language principles, it was possible to explain and discuss complex concepts in ways that were accessible for community members and leaders.
- Community-level training is more accessible for community participants. The team observed that it was more effective to run a week-long training per barangay so that participants could return home each day. This contrasts with the initial plan to conduct a single week-long training at a central location, bringing participants from multiple barangays together and requiring them to stay overnight in hotels. Many participants declined to attend the overnight training due to their family commitments.
- With enough time, CLDRM+ prompts in-depth discussion of protection risks in DRR. The project team observed that the CLDRM+ process encouraged barangay participants to think beyond traditional natural and manmade hazards and consider protection risks as well. Participants analyzed the protection risks present in their areas before, during and after disaster shocks. However, participants tired quickly because of the short but intense brainstorming sessions. Dedicating extra time for discussion could encourage even more in-depth discussion and analysis of protection risks.
- The Safety-Access-Dignity (SAD) approach works well when there are disaggregated groups. Partner staff observed that grouping participants helped unpack protection risks. For example, people with disabilities were grouped together, as were older people, single heads of household, etc. This helped participants to identify common needs and risks specific to different groups.
- Implementing the CLDRM+ alongside ongoing disaster preparedness projects improved targeting and increased impact. Tools, lessons learned and recommendations from these activities have already been used in the creation of DRRM plans in the ten target barangays. This is important because it implies that protection risks will be considered when designing response plans at the barangay level.
- Involving local partners contributes to greater sustainability. CRS actively involved its two diocesan partners in facilitating the CLDRM+ process. Partners led the risk assessment processes with the ten target barangays. By advancing local leadership in this way, partner staff may become champions of the CLDRM+ and safe and dignified programming now and in the future.

■ Local coordination structures can bring greater focus to safe and dignified programming. Learning from the workshops influenced Barangay DRRM committees in all the target sites to review and modify their existing coordination structures. The committees decided to set up their own "protection teams," creating a mechanism to further draw out protection risk discussions and identify risk mitigation measures. These protection teams also serve as a promising entry point for meaningful inclusion of members of vulnerable groups.

# Part 4: 4.5 The Philippines: Developing the Local Codes of Conduct

In the Philippines, all government officials—including members of local Disaster Risk Reduction and Management (DRRM) committees and councils—are required to behave in line with the *Code of Conduct and Ethical Standards* for Public Officials and Employees (Republic Act No. 6713). This is a national law enacted in 1989. The Code of Conduct (CoC) sets out the expected behavior of all government employees. This includes carrying out their duties with responsibility, integrity, competence and loyalty.<sup>54</sup>

# Challenges putting policy into practice

The CoC sets out important expectations of government officials. However, there are gaps in its requirements. Its uptake and enforcement are also uneven across localities. It does not explicitly mention the <a href="IASC Six Core Principles Relating to Sexual Exploitation and Abuse">IASC Six Core Principles Relating to Sexual Exploitation and Abuse</a>, which applies to all humanitarian actors. While all government officials are required to sign a CoC, there are varying practices for disseminating information about the CoC and ensuring compliance. For example, local government units (LGUs) with human resources departments orient staff on the CoC. However, LGUs without human resources may not have the capacity to do so. These gaps can increase the risk of misconduct—including the abuse and exploitation of communities affected by natural disasters—and vulnerable groups, such as people with disabilities, children, women and older people.

# Local CoCs to complement national law

The United States Agency for International Development (USAID)/Bureau for Humanitarian Assistance (BHA)-funded *Preparing to Enhance Protection in Disasters (PrEPD)* project proposed that targeted barangays (districts) and cities draft local CoCs for members of the City Disaster Risk Reduction and Management (DRRM) Council and Barangay DRRM Committee. This approach created several opportunities:

- Include the IASC Six Rules in the local CoC. These rules are critical to safe and dignified disaster preparedness and response activities and disaster risk reduction (DRR) actors, both at the city and barangay levels, must strictly observe them.
- Make sure DRRM committees and councils sign a CoC reinforces the importance of staff conduct and principles such as accountability and integrity. It was also a way to document the commitment of members to respect ethical standards.
- This approach could be tested with a small group. It may be scalable across other government departments.

To support this effort, the project team developed a CoC training adapted to DRR and local humanitarian actors. They then used the training across project sites and documented participant feedback. This process was accelerated because PrEPD was implemented alongside the USAID-funded Supporting Household and LGU Awareness and Knowledge for Earthquake Preparedness (SHAKE) project. This meant PrEPD staff members were able to use existing relationships with DRRM committees and councils.

#### Results to-date and lessons learned

Overall, the CoC training received positive feedback from barangay and city-level participants, who highlighted its value, impact and relevance. They noted that the risk of misconduct in their context is high because vulnerable communities frequently interact with DRRM actors responding to climate-induced disasters.

<sup>&</sup>lt;sup>54</sup> RA No. 6713, Code of Conduct and Ethical Standards, https://www.dilg.gov.ph/PDF\_File/issuances/republic\_acts/RA\_6713.PDF.

The CoC sessions also raised the following lessons:

- CoC principles are better accepted and understood when translated into the local language. The initial CoC package was written and released in English. Based on previous learning, the team chose to facilitate the CoC sessions in the local language. The team then translated the CoC PowerPoint slides into Filipino to explain the concepts more effectively to barangay and city participants.
- Training can increase buy-in to key concepts of safe and dignified programming. By training on CoCs, the project team hoped to increase buy-in from participants. They also hoped to encourage DRRM committees to develop their own CoCs for all members. This suggestion was well received. The next step was to designate focal points in the ten targeted barangays and five cities who would later be responsible for drafting the CoCs. Catholic Relief Services (CRS) partners—Caritas Pasig Inc. and CSA Malolos—continue to support focal points in this writing process.
- Including the CoC in existing guidance—such as government-mandated plans—can help embed safe and dignified programming. DRRM committees and councils drafting CoCs have agreed to include the final version as an annex in future DRRM and Contingency Plans. By institutionalizing the CoC in this way, the project team hopes it will remain a top priority for DRR actors.

# Looking ahead

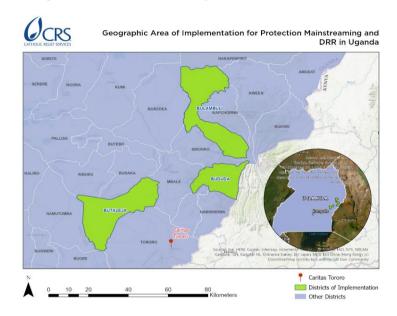
PrEPD has been successful in supporting its target barangays and cities to develop CoCs, but the possibility of scaling this approach to barangay or city-wide initiatives requires more time and resources. Government officials will need to review and analyze the merits of this initiative, as well as determine how it impacts their work and procedures. Nevertheless, adoption of local CoCs in the project's targeted areas will help safeguard vulnerable communities during future disaster preparedness and response activities.

# Part 4: 4.6 Uganda: Setting Up and Improving Feedback Mechanisms

Catholic Relief Services (CRS) and local partner, Caritas Archdiocese of Tororo, launched the *Preparing to Enhance Protection in Disasters (PrEPD)* Project in 2021 in Uganda's rural districts of Butaleja, Bulambuli and Bududa.

Prior assessments revealed gaps in national and local protection mechanisms and capacities, particularly channels for reporting feedback and complaints.

At the district and community levels, structures were in place to prevent and respond to protection issues. However, effective case management was undermined by the lack of accessible, integrated services and reporting mechanisms. The local institutions had weak procedures and there was ineffective coordination of services in districts. In addition, communities generally lacked information on how to report complaints, as well their rights and entitlements. This resulted in services not being used; yet at the time,



there was a rise in sexual and gender-based violence (SGBV) in at least one of the districts (Bulambuli).55

# **Building relationships**

The PrEPD project team reached out to district government stakeholders in major departments. This included the Departments of Natural Resources, Public Works, Marketing and Production, Health and Security/Police. These consultations identified key government partners who would later become safe and dignified programming focal points/champions. The discussions also facilitated access to communities in disaster-prone areas.

#### Leading by example

With an entry point into communities, the project team was able to identify a gap around feedback mechanisms. In response, they developed educational materials on community rights and entitlements and translated them into local languages. They used stakeholder meetings to inform community members about feedback mechanisms—including how to report complaints and what to expect in response. The team highlighted CRS' own hotline

<sup>&</sup>lt;sup>55</sup> Bulambuli Government. (2020):

https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwjhsqSxhOb8AhVARUEAHQljCaoQFnoECAsQAQ&url=https% 3A%2F%2Fbulambuli.go.ug%2Fsites%2Ffiles%2FDraft%2520Bulambuli%2520SGBV%2520Situation%2520report.docx&usg=AOvVaw33jHKLUSosfvuu0pA7hvXZ.

feedback mechanism as well as Caritas Tororo's face-toface mechanisms that project participants could use until a local feedback mechanism was put in place.

Capacity strengthening

The project team then shifted its focus to capacity strengthening. The team trained 282 people—including government officials and village Disaster Risk Reduction and Management (DRRM) committees. They also trained volunteer community Safeguarding Agents to be the first point of contact for community members who had experienced harm, abuse or exploitation. Half of the 32 Safeguarding Agents were female. The community Safeguarding Agents also served as a reliable source to share information with communities about the feedback mechanisms

# Local ownership

Next, the project team worked closely with its government focal points to map shock-responsive feedback mechanisms using the **2.1 Context Analysis and Consultation Tool for Feedback Mechanisms.** They found that the main feedback mechanism in use was local government structures. Feedback reported to these structures was logged in a central registry and sent to the appropriate department by the district's Chief Executive Officer. This mechanism could be used by anyone, but it was rarely used by community members. This may be because of a lack of awareness. The assessment also showed that the receipt and management of sensitive complaints depended on individual civil servants who were

"As a community development officer, safe and dianified programming has broadened

"The major gap I have identified is on the side of the referral pathways. Even when we have strengthened them at all levels, these could be compromised especially in favor of the well off against the poor... given the fact that there are no clear mechanisms of holding the two accountable."

# —COMMUNITY DEVELOPMENT OFFICER IN BUDUDA

using the accountability mechanisms, especially the feedback structures. One family that felt left [out] used the CRS toll-free line and called the subcounty and Caritas Director to consider them for inclusion [in the project]."

# —COMMUNITY DEVELOPMENT WORKER IN BUDUDA

regarded as more trustworthy by communities. The project team asked the local government to take the lead in setting up more reliable reporting channels for the community.

#### Putting feedback mechanisms to the test

Disaster struck before the project team could complete its activities. In July 2022, there was flooding in the Mt. Elgon region where the project's three target districts are located. Heavy rains caused major damage affecting approximately 13,000 households. Around 5,000 were displaced from their homes. <sup>56</sup> Government responders, Caritas Tororo and CRS needed to act quickly:

- With support from local governments, Caritas Tororo, CRS and World Vision Uganda received funding from the USAID-funded East and Central Africa Rapid Response Fund. This supported a cash response to meet the immediate needs of 2,500 of the affected households in Bulambuli and Bududa districts.
- Educational materials on rights and entitlements developed through the project were adapted and shared during the response. In addition, CRS' and Caritas Tororo's feedback mechanisms were widely used. The toll-free line was particularly useful for identifying inclusion/exclusion errors among those registered to receive support.

#### Next steps

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The project team is continuing to work with government stakeholders and (DRRM) committees to develop or improve simple feedback mechanisms. Planned activities include testing existing mechanisms to find gaps, developing Standard Operating Procedures (SOPs) using the <a href="2.2 Feedback Mechanisms Standard Operating Procedures">2.2 Feedback Mechanisms Standard Operating Procedures</a> and creating information-sharing plans. When completed, DRRM committees in each of the three targeted districts will have a functional, safe and accessible feedback mechanism. CRS will also work more with its partner Caritas Tororo to strengthen its feedback mechanisms.

<sup>&</sup>lt;sup>56</sup> Ugandan Red Cross Society (URCS) and the Ministry of Health.

#### Lessons learned

- Strong relationships with local governments support the uptake of the principles of safe and dignified programming. The strong relationships built with local government structures has led to the adoption of safe and dignified programming principles.
- Strengthening local leadership enhances results. Working with local government structures complements and provides support to mechanisms already in place. It also increases confidence among communities about their government's potential to respond.
- Local ownership is critical for lasting impact. CRS and Caritas do not always have the influence to change the mindset of government officials who are not committed to safe and dignified programming. The project team is highlighting these issues with district DRRM committees when they are identified. They work with them to make sure that staff with the appropriate service-oriented mindset are given the responsibility of managing the feedback mechanisms.
- Additional time may be needed for start-up and sustainability. District stakeholders noted the project was not long enough to set up the feedback mechanisms. This work needs the investment of district funds or the procurement of equipment, but local governments do not currently have budgets to cover this. It can take time to address these issues.
- Safe and dignified programming needs to be embedded and not just seen as an add-on. When safe and dignified programming is not deliberately included in preparedness and response plans, the risk of harm to the most vulnerable remains high, particularly in contexts that do not have adequate accountability mechanisms.

# **PART 5: GLOSSARY**

# **Glossary Process**

CLEAR Global worked through a number of steps to create a glossary that would be useful to Catholic Relief Services (CRS)' partners in talking about protection and accountability with community members and between each other. The process focused on creating a glossary of challenging concepts which can be hard to convey across languages.

The glossary process began with a discussion to fully understand the needs of CRS and its in-country partners and what were the main terminology challenges. CRS provided large volumes of existing materials to CLEAR Global, from which CLEAR Global extracted terms for consideration and discussion, resulting in a selected term list. For each selected term, a clearly written definition was created by CLEAR Global. These were discussed with CRS teams until there was an agreement that the definition appropriately captured the full meaning of the term. The final step in the definition process was a review of each definition to ensure that they were written using plain language principles.

The terms were translated into four selected languages and reviewed by a second translator and CRS teams. This process was followed by a field-test process whereby the most complex terms per language were selected. CLEAR Global supported CRS country teams to test the terms with people from within their communities from different demographic groups through a series of focus groups. This process ensured that the terms were well understood by all sections of the community, non-stigmatizing and conveyed the full meaning intended. Feedback from the community testing phase was incorporated into a further revision of the glossary for review and finalization.

#### **Abuse**

**Definition:** When a person purposely hurts another person who they have power over. Abuse can be physical, emotional or sexual.

#### Access

**Definition:** The right or ability to receive assistance or to use a particular good or service. Unrestricted access means there are no barriers to using that good or service.

# Accountability

**Definition:** Using power responsibly and in a way that is clear and open for everyone to see, especially for the people who are affected by how that power is used.

# Accountability to Affected People (AAP)

**Definition:** The process of using power responsibly by considering and being held accountable by an affected population, especially people who are affected by how that power is used.

#### **Action Plan**

**Definition:** A plan that explains the steps you must take to reach a goal. Action plans give you important information about activities, deadlines, who is responsible for what and what resources you will need.

# Affected Population, People Affected by Crisis

**Definition:** People who are affected, either directly or indirectly, by a crisis.

**Explanation:** We say people are directly affected when they have an injury or illness, are evacuated, displaced or relocated, or if the crisis directly affects their livelihoods or economic, physical, social, cultural and environmental resources.

#### Age

**Definition:** How long a person has been alive.

**Explanation:** Age is a key factor in doing analysis in programs on vulnerabilities, needs and capacities of different groups. People face different risks depending on their age/life-stage. Age can also overlap with other factors, such as sex/gender, and create higher risks. It is important to collect data that is disaggregated by age.

# Aid Worker

**Definition:** Someone who works or volunteers for an international or national non-governmental organization (NGO) or aid organization.

# **Explanation:** This includes:

- All international and national staff
- All personnel or employees
- Anyone who has a formal work agreement with these organizations:
  - Interns
  - Volunteers
  - International and local consultants
  - Contractors (including day laborers)

# Bureau for Humanitarian Assistance (BHA)

**Definition:** An organization that is part of United States Agency for International Development (USAID) and coordinates international disaster assistance from the United States of America (USA). BHA helps before, during and after a crisis.

# Capacity

**Definition:** The ability (knowledge, expertise, resources) of organizations or communities to deliver aid, reduce disaster risks and strengthen resilience.

# Cash for Work (CfW)

**Definition:** When a person is paid in cash for doing a particular kind of work. This is normally paid according to time worked (number of days, daily rate) or according to the work done (number of items made, cubic meters dug, etc.).

#### Child

**Definition:** Every human being below 18 years of age, irrespective of when the local law considers people as adults.

# Child in Conflict with the Law (CICL)

**Definition:** Anyone under 18 years of age who comes into contact with the police or courts because they are suspected or accused of a crime.

# Child Protection (CP)

**Definition:** Child protection means keeping children safe from harm. Harm includes violence, abuse, exploitation and neglect.

# Child With Disabilities (CWD)

**Definition:** A child whose body, mind or senses work differently from most other people in a way that makes it difficult to do certain things. Together with different kinds of barriers, this can prevent the child from participating in society equally.

#### **CHS Alliance**

**Definition:** A group of humanitarian and development organizations that work together to improve aid work by following the Core Humanitarian Standard (CHS).

**Explanation:** CHS is a document that describes commitments that organizations can use so the work they do to help people is better and more effective.

# Civil Society Organization (CSO)

**Definition:** A non-profit, voluntary citizens' group that is local, national or international and works on a particular humanitarian issue or area.

# Climate Change Adaptation (CCA)

**Definition:** Changes individuals, households or communities make to manage and prepare for how climate change affects us now and will affect us in the future.

#### Climate Risk

**Definition:** Refers to when you analyze how climate change may affect us and how likely are those effects. It considers how we can respond and which responses are socially acceptable.

# Cluster

**Definition:** Groups of humanitarian organizations that work on particular issues—such as water, health, protection, logistics, etc.

#### Code of Conduct (CoC)

**Definition:** A CoC tells you what behaviors are and are not acceptable in an organization. It protects the people the organization serves, and the reputation of the organization.

#### Community

**Definition:** A group of people who share or are thought to share cultural, religious or other social characteristics, and have a collective identity and shared goals.

# **Community Engagement**

**Definition:** A two-way dialogue between crisis-affected communities and organizations to understand communities' needs and to build trusting relationships with them.

# Community-Based Organization (CBO)

**Definition:** A local, regional or national organization that works to meet community needs, make initiatives possible and encourage development.

# Community-Led Disaster Risk Management+ (CLDRM+)

**Definition:** When diverse groups in communities are involved with and lead the disaster risk management planning process. This involves identifying key challenges related to natural and manmade hazards, along with associated protection risks. Outputs of the process include developing action plans to reduce risks that have been prioritized by vulnerable communities.

# Complaint

**Definition:** When you express that you are angry, dissatisfied or disappointed with an organization because of something it did, or something it failed to do.

# Confidentiality

**Definition:** The obligation to make sure that information about a person is not shared without permission.

# Core Humanitarian Standard (CHS)

**Definition:** A standard that describes commitments that organizations and individuals can use to improve the humanitarian assistance they offer communities.

# Cyclone

**Definition:** A storm that often brings very heavy rain.

# Defilement

**Definition:** Sexual activity with a child (any person under 18 years of age).

**Explanation:** This is a serious crime under law in numerous countries.

# Dignity

Definition: The importance and value of a person, which gives them self-respect and makes others respect them.

#### Disaster

**Definition:** An event that creates damage, loss or destruction to people or communities.

**Explanation:** Disasters create human, material, economic and environmental losses.

# Disaster Management

Definition: Actions taken to prevent, prepare for, respond to or recover from a disaster, now and in the future.

# **Disaster Preparedness**

**Definition:** The information and skills that governments, response and recovery organizations, communities and individuals develop to predict, react to and recover from disasters.

# Disaster Prevention and Mitigation (P&M)

**Definition:** Efforts to reduce the damage and suffering that disasters can cause.

# Disaster Risk

**Definition:** The deaths, injuries or damage that a system, society or community may experience over a particular time.

**Explanation:** Risk is calculated by looking at hazards, exposure, vulnerability and capacity.

# Disaster Risk Management

**Definition:** Using disaster risk reduction policies and strategies to prevent, reduce and manage risk. This strengthens resilience and reduces losses in a disaster.

# Disaster Risk Reduction (DRR)

**Definition:** The policy goal of preparing for and lessening risk.

# Disaster-Vulnerable Communities

**Definition:** Communities that could or are likely to experience natural disasters.

# **Diversity**

**Definition:** The range of different values and characteristics—such as beliefs, backgrounds, abilities and other personal characteristics.

**Explanation:** To protect all affected people in a disaster, it is important to recognize, understand and value these differences during planning.

#### Do No Harm

Definition: The idea of not accidentally hurting or harming people while doing humanitarian work.

# Drought

**Definition:** An unusually long period of dry weather that damages crops.

# Early Warning System (EWS)

**Definition:** A system for checking and predicting hazards, understanding disaster risks and doing communication and preparedness activities. Together, these make it possible to lessen the risks of disasters.

#### Earthquake

Definition: A shaking or trembling of the earth because of volcanic activity or movements in the earth's plates.

#### **Economic Loss**

**Definition:** The monetary value of total or partial destruction of physical assets (like land, tools or machinery) in an area. Total economic loss also includes a decline in value because of this.

# **Emergency Field Operations Manual (EFOM)**

Definition: A manual that helps Emergency Responders set up operations at the beginning of an emergency.

# **Environmental Stewardship**

Definition: Using and managing natural resources in a sustainable way and actively restoring them.

#### Evacuation

**Definition:** Moving people and assets to safer places before, during or after a dangerous event in order to protect

# **Evacuation Center (EC)**

**Definition:** A temporary safe space that provides people with basic shelter during an emergency.

## **Exploitation**

**Definition:** When someone trusted or with power over others takes advantage of their position to control others or achieve their consent.

**Explanation:** One example is when a group (an organization or government) has resources that meet the needs of a vulnerable group.

# **Exposure**

**Definition:** Temporarily moving people and assets to safer places before, during or after a dangerous event to protect them.

# Family Tracing and Reunification

**Definition:** When you find separated family members and reunite them after a natural disaster, armed conflict or other violent situation.

#### Feedback

Definition: People's opinions, complaints and suggestions about how organizations behave and what they do.

#### Feedback Mechanism

**Definition:** A system that helps people who get assistance or are affected by a crisis to tell organizations if the assistance is helpful or if they have complaints.

**Explanation:** Organizations can use this information to improve their work. People can also give feedback informally outside of this system.

# Flooding, Flood

**Definition:** When large amounts of water cover an area that is usually dry.

# Focus Group Discussion (FGD)

**Definition:** A type of group interview to discuss people's opinions or find out what issues are most important to a community or group.

#### Gender

**Definition:** Refers to the social roles and behaviors that women, girls, men and boys adopt. Gender roles are learned, can change and are different from culture to culture.

#### Gender Division of Labor

**Definition:** How a society divides work among men and women, boys and girls, according to gender roles established in society.

Explanation: What society considers suitable and valuable work for each sex.

# Gender Role

Definition: The role or behaviors that are associated with each sex, based on cultural attitudes in society.

# Gender-Based Violence

**Definition:** When a person is hurt because of their gender. This includes physical, sexual or mental harm and threats. It can happen in public or in private.

# Global Protection Cluster (GPC)

**Definition:** The Global Protection Cluster is a network of NGOs, international organizations and United Nations (UN) agencies that work together to protect populations during humanitarian crises, for example, armed conflict and natural disasters.

#### Harassment

**Definition:** Harassment is behavior in the workplace that is unwanted and uninvited, threatening or offensive, and creates a hostile environment.

#### Hazard

**Definition:** Any event, situation or activity that can cause death, injury, property damage, disruption or environmental problems.

# Hazard Map

**Definition:** A map showing areas that are exposed to natural or manmade hazards.

#### Hotline

**Definition:** A telephone number you can call to report problems.

# **Human Rights**

**Definition:** The basic rights and freedoms that we believe belong to every human being, regardless of their characteristics or status, from birth until death.

#### **Humanitarian Actor**

**Definition:** An organization that supports humanitarian causes and brings international humanitarian assistance to the places and people who need it.

#### **Humanitarian Assistance**

**Definition:** Help from organizations that try to save lives and ease suffering during a crisis.

# **Impairment**

**Definition:** An injury, illness or condition that means that parts of a person's body, brain or senses do not work the way they normally would or the way they do in most people.

# **Impartiality**

**Definition:** For humanitarian actors, impartiality means helping every person in need and treating every person equally in a humanitarian crisis.

#### Inclusion

**Definition:** When all people and groups can participate fully in economic, social, political and cultural life (see next column for explanation).

**Explanation:** This principle protects vulnerable groups—such as women, children, youth, the elderly and people with disabilities—and are included during DRR exercises (e.g., vulnerability/capacity mapping and action planning) to mitigate the impact of specific hazards.

# Information, Education and Communication (IEC)

**Definition:** Using posters, flyers, brochures or radio/TV advertisements to try to change how people approach a particular problem.

# Inter-Agency Standing Committee (IASC)

**Definition:** A high-level forum that organizes humanitarian preparedness and response efforts, forms policy and agrees on how to strengthen humanitarian action.

#### Internally Displaced Persons (IDPs)

**Definition:** People who are forced to leave their own home due to war, violence, human rights violations or environmental disasters—but do not cross a border.

# International Non-Governmental Organization (INGO)

**Definition:** An organization that is independent of government and extends the idea of a NGO to an international level.

#### Intersectionality

**Definition:** A way of thinking about how different kinds of discrimination (for example racism and sexism) combine and overlap. This is especially important for marginalized people and groups.

# Key Informant Interview (KII)

**Definition:** Personal, detailed interviews with people who have experience of something of which/whom the interviewer is interested.

#### Landslide

**Definition:** When a mass of rock or earth moves downward on a slope, usually very quickly.

#### Livelihood

**Definition:** A livelihood is a means of making a living. It encompasses people's capabilities, assets, income and activities required to secure the necessities of life.

# Local Government Units (LGUs)

**Definition:** A unit that has authority over the smallest geographical area that is recognized as an administrative and political unit.

# Marginalized

**Definition:** When people or groups are treated as less important than others.

# Marginalized Group

**Definition:** A group of people who do not enjoy the same rights and freedoms as the rest of society because they are considered less important.

# Meaningful Access

**Definition:** Giving people access to help and services based on their needs and without barriers (that is, without discrimination).

**Explanation:** This requires paying special attention to individuals and groups that may be particularly vulnerable or have difficulty accessing help and services.

# Misconduct

**Definition:** When a person behaves in ways that are not acceptable, especially at work.

# Mitigation

**Definition:** Actions that can lessen the harmful effects of a disaster.

# Monitoring, Evaluation, Accountability and Learning (MEAL)

**Definition:** Tracking the progress of a program, changing it based on feedback and data, and assessing results to improve the quality of the program and be more accountable to people who participate in it.

#### **Natural Hazard**

**Definition:** A natural process or event that may kill or injure, damage property, destroy livelihoods, interrupt services and cause disruption or environmental damage.

#### **Needs Assessment**

**Definition:** When you collect information about what a person or group's basic humanitarian needs are for food, hygiene, shelter, education, etc.).

# Non-Governmental Organization (NGO)

**Definition:** An organization that is independent from government and usually non-profit.

# Persons with Disabilities, People with Disabilities

**Definition:** A person whose body, mind or senses work differently from most other people's, in a way that makes it difficult to do certain things; it may also be due to various barriers.

**Explanation:** This can stop the person from participating fully and equally in society.

# Post-Disaster Needs Assessment (PDNA)

**Definition:** An objective, comprehensive and government-led assessment of damages, losses and recovery needs after a disaster.

#### Power

**Definition:** This is a measurement of how much different people or parts of society can control resources or each other.

#### **Preparedness**

**Definition:** The knowledge and capacities that governments, organizations, communities and individuals develop to prepare for, respond to and recover from disasters.

# Preparing for Enhanced Protection in Disasters (PrEPD)

**Definition:** CRS's 18-month global project to help communities add protection to their work on disaster risk reduction, preparedness and response.

#### Prevention

**Definition:** Activities to reduce existing and new risks and protect people from risks.

# **Program Cycle**

Definition: The entire course of a project.

# **Program Participant**

**Definition:** Any person who participates in a program carried out by an organization.

Explanation: This term is preferred to "beneficiary."

#### Protection

**Definition:** Everything you do to make sure people's fundamental rights are respected and people are free from violence, coercion, discrimination and deliberate deprivation.

#### Protection Against Sexual Exploitation and Abuse (PSEA)

**Definition:** Actions to protect vulnerable people against sexual exploitation and abuse by humanitarian workers.

# Safe and Dignified Programming, Protection Mainstreaming

**Definition:** This helps make sure programs respect the safety, meaningful access and dignity of people and communities.

#### **Protection Risk**

**Definition:** The defines the possibility of someone experiencing danger or harm—including through violence, coercion, discrimination or deliberate deprivation.

# **Protection Risk Analysis**

**Definition:** Protection risk analysis helps you to understand the risks that threats and vulnerabilities can create.

**Explanation:** It is important to look at how these risks can affect people's access to their rights, safety and dignity.

#### Protection Threat, Threat

**Definition:** A threat created by other people (such as violence, coercion, discrimination, etc.) that affects a person's ability to access their rights and get help.

# Protection from Sexual Exploitation, Sexual Abuse and Sexual Harassment (PSEAH)

**Definition:** The term the UN and NGOs use to describe what they do to protect people against sexual exploitation and abuse from their own staff.

# Psychological First Aid (PFA)

**Definition:** Offering compassion and support to a person who is suffering, focused on listening and linking them to available services and support.

# Rape

**Definition:** When a person penetrates any part of another person's body without their consent.

Explanation: Consent means that you freely agree to something.

#### Referral

**Definition:** Directing a victim/survivor somewhere else because they need help that their current service provider cannot give them.

# Referral Pathway

Definition: A safe way for people to find different kinds of help, like medical care or help from the police.

#### Resilience

**Definition:** The ability to deal with and recover well from a difficult experience or situation in a reasonable amount of time.

Explanation: Resilience can include preserving and restoring essential structures and functions.

# Response

**Definition:** Offering help and goods during or right after an emergency to save lives, reduce health problems, protect the public, maintain human dignity and meet basic needs.

# **Rights and Entitlements**

**Definition:** Individuals and communities receiving assistance have various rights—including the right to access basic services on the basis of need, to live in safety and dignity, not to be hurt, to get information about services/assistance provided and to be able to give feedback and make complaints.

#### Safeguarding

**Definition:** The responsibility that organizations have to make sure their staff members and work do not harm children and adults who are at risk, and do not expose them to abuse or exploitation.

# Safeguarding Agent

**Definition:** A member of the community who is trained to help people with safeguarding issues during an emergency response and support them if they choose to report a problem.

#### Safeguarding Policy

**Definition:** An organization's guidelines that explain its duty to treat all people with respect.

#### Safety

**Definition:** Being protected from danger, risk or injury—including physical, environmental, social, spiritual, political, emotional or psychological harm.

# Sendai Framework for Disaster Risk Reduction (SFDRR)

**Definition:** The Sendai Framework for Disaster Risk Reduction 2015–2030 focuses on how to prevent risks, reduce existing risk and increase resilience.

#### Sensitization

**Definition:** A way of making people more aware of an issue by repeatedly giving them information about it.

#### Sex

**Definition:** This refers to the biological characteristics of women and men. It is natural, determined by birth and therefore generally unchanging and universal.

**Explanation:** The different biological and physiological characteristics of males and females.

#### Sexual Abuse

**Definition:** When someone forces or threatens someone with sexual contact because they are stronger or have more power.

#### Sexual Assault

Definition: Any form of sexual contact that one person forces on another person against their will.

# Sexual Exploitation

**Definition:** Abusing a person's vulnerability, unequal power or trust for sexual purposes. This can include profiting in any way from another person being sexually exploited.

# Sexual Exploitation and Abuse (SEA)

**Definition:** When a person uses a position of power for sexual purposes against a program participant or vulnerable member of the community.

# Sexual Harassment

**Definition:** Any unwelcome words, actions, or any other behavior that is sexual between people in a workplace is sexual harassment. The behavior is generally considered offensive in the local context and interferes with work.

#### Sexual Violence

**Definition:** When a person forces another person or people to do anything sexual that they do not freely agree to, by force or through threats.

#### Shelter

**Definition:** A place for people to live when it is not safe to stay in their homes.

# SPHERE Handbook

**Definition:** The SPHERE handbook explains minimum humanitarian standards to promote quality and accountability in humanitarian programs.

#### Staff

**Definition:** People who work for an organization—including volunteers, visitors and consultants.

# Standard Operating Procedures (SOPs)

Definition: Step-by-step instructions for how staff members in an organization should do different jobs or tasks.

#### Storm Surge

**Definition:** An unusual rise in the level of seawater during a storm, compared to the normal tide.

# **Suggestion Box**

**Definition:** A box where people can leave comments anonymously about how a program can be improved.

# Survivor, Victim

**Definition:** A person who has been harmed, sexually exploited or abused.

**Explanation:** The term "survivor" emphasizes strength, resilience and survival. The term "victim" emphasizes that the person must be protected and needs justice.

# Survivor-Centered Approach, Victim-Centered Approach

**Definition:** An approach that puts survivors' wishes, safety, and well-being at the center of the process, at all times and in all situations.

# Suspicion

**Definition:** A concern that a fellow worker is abusing or exploiting someone. You must report suspicions using the official agency reporting mechanisms.

#### **Tsunami**

**Definition:** A great wave or several very large waves, caused by movements in or under the water.

# **T**yphoon

**Definition:** An extremely large, powerful and destructive storm that often starts in the northwestern Pacific Ocean.

**Explanation:** Typhoon, hurricane, cyclone and tropical cyclone are different words for the same thing in different regions.

# **Unaccompanied Child**

**Definition:** A child outside of its home country that has been separated from all adults in its family (and any other adults who care for the child).

# **United Nations (UN)**

**Definition:** The UN was set up to help governments work together to maintain peace and security, develop friendly relations and encourage cooperation.

# United Nations Office of Disaster Risk Reduction (UNDRR)

**Definition:** A UN office that aims to put the International Strategy for Disaster Reduction and the Sendai Framework into effect.

# **Vulnerability**

**Definition:** A characteristic or circumstance that puts a person at higher risk of being harmed or hurt. Vulnerability is different for each person and situation.

# **Vulnerability Assessment**

**Definition:** A vulnerability assessment is when information is collected about how people, communities, assets or systems are vulnerable to hazards with an attempt to understand what causes these vulnerabilities.

# **Vulnerable People**

**Definition:** People who have more difficulty taking care of themselves and protecting themselves against harm or exploitation.

**Explanation:** This can be for any reason, including age, illness, trauma or disability.

# Water, Sanitation and Hygiene (WASH)

**Definition:** WASH programs aim to make sure people have safe drinking water, hygiene and sanitation services.

#### Zero Tolerance

Definition: No tolerance for inaction when allegations of sexual exploitation, abuse and harassment are received.