Evaluation of Protection in Australia’s disaster responses in the Pacific

Independently-led evaluation undertaken by IOD PARC

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Picture of Australian funded UNFPA dignity kit. Photo credit: Amra Lee 2018.

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# Acronyms

|  |  |
| --- | --- |
| AAP | Accountability to affected populations |
| AHP | Australian Humanitarian Partnership |
| AQC | Aid Quality Check (DFAT) |
| AusAID | (Former) Australian Agency for International Development |
| CDAC | Communicating with Disaster Affected Communities |
| CERF | Central Emergency Response Fund |
| CHS | Core Humanitarian Standard on Quality and Accountability |
| DFAT | Department of Foreign Affairs and Trade |
| DPO | Disabled people’s organisation |
| FAQC | Final Aid Quality Check (DFAT) |
| HAQC | Humanitarian Response Aid Quality Check (DFAT) |
| GenCap | Gender Standby Capacity Project (IASC) |
| GPC | Global Protection Cluster |
| HMB | Humanitarian Response, Risk and Recovery Branch (DFAT) |
| HPD | Humanitarian, NGOs and Partnerships Division (DFAT) |
| IASC | Inter-Agency Standing Committee |
| ICRC | International Committee of the Red Cross |
| IFRC | International Federation of Red Cross and Red Crescent Societies |
| INGO | International non-government organisation |
| IPPF | International Planned Parenthood Federation |
| LGBTI | Lesbian, gay, bisexual, transgender and intersex |
| M&E | Monitoring and evaluation |
| MEF | Joint MFAT-DFAT Humanitarian M&E Framework for the Pacific |
| MFAT | Ministry of Foreign Affairs and Trade (New Zealand) |
| MHPSS | Mental health and psychosocial support |
| MICS | Multi Indicator Cluster Survey |
| NGO | Non-government organisation |
| OCHA | UN Office for the Coordination of Humanitarian Affairs |
| ODE | Office of Development Effectiveness (DFAT) |
| OHCHR | Office of the UN High Commissioner for Human Rights |
| PAF | Performance Assessment Framework |
| PIC | Pacific island country |
| PIF | Pacific Islands Forum |
| PNG | Papua New Guinea |
| ProCap | Protection Standby Capacity Project (IASC) |
| PSEA | Prevention of sexual exploitation and abuse |
| SGBV | Sexual and gender-based violence |
| SOGI | Sexual orientation and gender identity |
| SPC | The Pacific Community |
| SPRINT | Sexual and Reproductive Health in Crisis and Post Crisis Situations |
| SRHR | Sexual and reproductive health and rights |
| TC | Tropical Cyclone |
| ToR | Terms of reference |
| UNHCR | Office of the UN High Commissioner for Refugees |
| UNICEF | United Nations Children’s Fund |
| UNFPA | United Nations Population Fund |
| UN Women | United Nations Entity for Gender Equality and the Empowerment of Women |
| WoSR | (IASC-commissioned) Independent Whole of System Review of Protection in the Context of Humanitarian Action |
| WPS | Women, peace and security |

# Executive Summary

In 2013, Australia published its Protection in Humanitarian Action Framework (the Protection Framework). The Inter-Agency Standing Committee (IASC) definition of protection endorsed in the Framework is:

*All activities, aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (i.e. human rights, humanitarian and refugee law). Human rights and humanitarian actors shall conduct these activities impartially and not on the basis of race, national or ethnic origin, language or gender.*

The Framework articulates DFAT’s commitments to funding and advocacy for both protection mainstreaming and dedicated protection programs. It prioritises improved global capacity for accountability to affected populations (AAP), protecting people with disability and preventing and responding to gender-based violence (GBV). In 2016, DFAT published its Humanitarian Strategy which commits to protection as one of five central thematic priorities.

An evaluation was undertaken to:

* Assess to what extent Australia's investments in protection in humanitarian action in the Pacific – through dedicated programming and mainstreamed approaches – have been timely, effective and appropriate;
* Compile lessons and recommendations that can inform DFAT's future investments in – and management of – disaster preparedness and response;
* Compile lessons and recommendations to inform DFAT's future policy advocacy for protection in humanitarian action.

The evaluation also assessed the extent to which DFAT’s commitments and investments in protection in humanitarian action aligned with normative developments at the broader humanitarian system. This includes the 2013 IASC Principals Statement on the Centrality of Protection and 2016 IASC Protection Policy.

The temporal scope of the evaluation covered the financial years 2013-14 to 2017-18, with emphasis on current capacity and performance, and drawing on the most recent information available on relevant investments. The geographic scope is the Pacific, including Papua New Guinea (PNG). This typically but not exclusively involves sudden onset disaster response, which is a very different humanitarian protection context to conflict and protracted crises. Nevertheless, core normative sector standards and principles apply to disaster preparedness and response including the ‘centrality of protection’.

#### Key findings

#### Institutionalisation within DFAT

Australia is well regarded for its global advocacy and support for protection in humanitarian action. Nevertheless, this evaluation found that there is limited awareness and understanding of the Protection Framework across DFAT in the context of the Pacific and in relation to the principle of the ‘centrality of protection’. The 2016 Humanitarian Strategy includes protection as a thematic priority, however its inclusion as one of five priorities may have further confused its effective prioritisation. Protection cannot be relegated to one of several thematic or cross-cutting issues; it is central to the relevance and effectiveness of humanitarian action.

Key DFAT commitments to humanitarian sector reform in the context of the 2016 World Humanitarian Summit related to localisation, leaving no one behind and bridging the humanitarian-development divide in disaster settings; all of which require significant shifts in internal systems, processes and tools. The shared Agenda for Humanity and 2030 Agenda for Sustainable Development commitment to leaving no one behind highlights the need for a broader approach to protection risk analysis and to work better across the humanitarian-development divide to address chronic vulnerability and build greater resilience.

#### Operationalisation in the Pacific

Recent humanitarian responses in the Pacific have identified protection concerns related to distributions, temporary shelter and displacement; mental health and psychosocial support (MHPSS); and increases in pre-existing and new vulnerabilities related to sexual and gender-based violence (SGBV), child protection, disability and exclusion of people from the lesbian, gay, bisexual, transgender and intersex (LGBTI) community. The evaluation found DFAT had not invested adequately in access to the above broader protection risk analysis to inform its disaster response programming in the Pacific.

Protection in the Pacific is in part constrained by contextual factors such as the limited presence of mandated protection partners and the unique humanitarian architecture in this region. On the other hand, there are significant opportunities for DFAT to have an impact as a lead donor by investing in preparedness, resilience, localisation, and recovery programming. Investments in preparedness in particular are key to effective protection responses in the Pacific.

Australia’s commitments and approach to protection in humanitarian action are clear in so far as they relate to the Protection Framework’s thematic priorities, but not in relation to ensuring the centrality of protection in the Pacific. Reliance on current partners falls short of meeting this standard in the Pacific, and the protection cluster capacity varies significantly across the region. A fundamental issue appears to be the lack of timely access to a comprehensive protection risk analysis.

Australia’s investments in protection are difficult to track across the many different levels of action and respective funding sources. Monitoring and evaluation (M&E) for protection is predominantly undertaken through Humanitarian Aid Quality Check (HAQC) processes and there is limited accountability for protection funding outside this, including to multilaterals. The lack of a clear monitoring framework for protection in humanitarian action has presented a significant challenge for measuring results in this area.

#### Recommendations to DFAT management

The six overarching recommendations to better institutionalise protection within DFAT and more robustly operationalise it in the Pacific are outlined below.

Recommendation 1: Increase access to timely protection expertise and comprehensive protection risk analysis.

Recommendation 2: Recruit and support senior protection champions within DFAT and invest in staff capability.

Recommendation 3: Engage more strategically with national stakeholders on operationalising protection in the Pacific, and identify the most appropriate mechanisms and partnerships to address protection gaps.

Recommendation 4: Review and update DFAT’s humanitarian commitments, processes and tools for clarity and coherence, and more consistent prioritisation of protection in practice.

Recommendation 5: Expand investments in protection activities to support greater preparedness and resilience, and consider opportunities for a more strategic approach through regional and bilateral assistance.

Recommendation 6: Commit to donor leadership on advancing protection in humanitarian action and in the Pacific in particular recognising Australia’s investments to date, potential for new humanitarian reform priorities post WHS-GB and the opportunity for donor leadership in this area.

It is further advised that DFAT commission a follow up to this evaluation to review the protection framework’s implementation in protracted crises and the impacts of armed conflict and displacement more specifically.

# Introduction

**Humanitarian response in the Pacific** is predominantly driven by cyclical disaster risks and sudden onset disasters. There will be increasing risks associated with the frequency and impact of climate-induced disaster shocks. While the risks of armed conflict and large-scale displacement are low, intercommunal and interpersonal violence, including high levels of SGBV are present, with PNG presenting significant challenges compared with other Pacific island countries (PICs[[1]](#footnote-2),). Conflict risks and related grievances exist in PNG, Bougainville, Solomon Islands and Fiji in particular. An estimated 17 per cent of people in the Pacific have some form of disability[[2]](#footnote-3). A conservative estimate for the representation of people of diverse sexual orientation and gender identities is a minimum of 5 per cent[[3]](#footnote-4). These dynamics and demographics require a conflict-sensitive and age, gender and diversity lens to be applied across preparedness, response and resilience efforts in the Pacific.

**Disasters** **create new protection risks** (see Figure 1 below) through a breakdown in the protective environment, the psychosocial impacts of the event, harmful coping mechanisms and risks from temporary shelters and displacement. Disasters also **exacerbate pre-existing risks and development deficits** including access to specialised services and patterns of SGBV (domestic violence due to increased household pressures and transactional sex) and child protection. Exclusion risks for people with disabilities, members of the LGBTI community, older people and other marginalised groups continue and are exacerbated in disaster contexts. Cyclical disaster risks and shocks undermine the resilience of vulnerable groups, necessitating investment in social protection mechanisms.

In the global humanitarian architecture, the protection cluster in disasters may be led by the Office of the UN High Commissioner for Human Rights (OHCHR), the Office of the UN High Commissioner for Refugees (UNHCR) or the UN Children’s Fund (UNICEF), depending on operational presence. However, in the Pacific, the UN Entity for Gender Equality and the Empowerment of Women (UN Women) has been supported by DFAT to assume this responsibility.

This evaluation focuses on both the [**Protection in Humanitarian Action Framework for the Australian Aid Program**](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&ved=2ahUKEwjgwtSH75jfAhWEErwKHcPPCSsQFjABegQIBxAF&url=https%3A%2F%2Fdfat.gov.au%2Fabout-us%2Fpublications%2FPages%2Fprotection-in-humanitarian-action-framework.aspx&usg=AOvVaw0HeBKCvyXBilRMhcWof9Rq)(the Protection Framework)released in 2013 by the Australian Agency for International Development (AusAID) and the [**Humanitarian Strategy**](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=2ahUKEwiOm6u575jfAhWFzLwKHSE8B2MQFjAAegQICBAB&url=https%3A%2F%2Fdfat.gov.au%2Fabout-us%2Fpublications%2FPages%2Fhumanitarian-strategy.aspx&usg=AOvVaw0I9-4pEW-HT91RxRdUhnl0) released by DFAT in 2016.

* Addressing displacement e.g. shelters, safety and inclusion
* Specific needs e.g. SRHR, dignity kits, older people, people with disabilities, children, LGBTI community
* Referral pathways and mobile services e.g. MHPSS, child protection, GBV
* Cluster support, Disaster Ready, risk analysis
* Community based e.g. Psychosocial First Aid
* Partnerships e.g. DPO, agencies with expertise in LGBTI issues, mobile services, inclusive community structures
* Livelihoods and social safety nets
* Protective laws, policy and services for children, women, people with disabilities, older people, LGBTI community
* Behavioural change campaigns for harmful social norms

**Preparedness**

Livelihoods and social safety nets

Protective laws, policy and services for children, women, PWD,

older people, LGBTI

Behavioural change campaigns for harmful social norms

Figure 1 Protection in humanitarian action and indicative investments across the continuum

Protection is one of the Humanitarian Strategy’s five thematic priorities. There are further relevant guiding principles underpinning the Strategy including promoting respect for international law, integrating gender equality and social inclusion, putting affected people at the centre of humanitarian assistance, applying ‘Do No Harm’ approaches, and ensuring accountability to the Australian people and communities Australia assists.

The Protection Framework (Annex I) outlines two key strategies to improve the safety of people affected by natural and human induced crises, namely that:

* *Australia supports protection in preparedness for, response to and recovery from humanitarian crises by funding and advocating for:*
  + *protection to be mainstreamed into humanitarian action*
  + *dedicated protection programs as part of humanitarian action.*
* *Australia supports and advocates for improved global capacity for protection. [DFAT’s] priority areas are:*
  + *being accountable to affected populations*
  + *protecting people with disability*
  + *preventing and responding to gender based violence.*

#### Evaluation purpose

The evaluation was commissioned by DFAT as one of two humanitarian program prioritised evaluations in 2018. The Humanitarian, NGOs and Partnerships Division (HPD) aims to understand how well DFAT and its partners are delivering against the protection priorities and commitments set out in the 2013 Protection Framework and the 2016 Humanitarian Strategy.This includes consideration of whether performance and quality meet the expectations of the Australian Government and the international community, in line with commitments to accountability and continuous improvement. It is anticipated that lessons identified from this evaluation will influence future programming.

As stated in the Terms of Reference (Annex II), the purpose of the Evaluation is to:

* Assess to what extent Australia's investments in protection in humanitarian action in the Pacific – through dedicated programming and mainstreamed approaches – have been timely, effective and appropriate.
* Compile lessons and recommendations that can inform DFAT's future investments in – and management of – disaster preparedness and response.
* Compile lessons and recommendations to inform DFAT's future policy advocacy for protection in humanitarian action.

The key evaluation questions are outlined in the terms of reference (ToR) and cover (i) clarity and coherence, (ii) investment design, appraisal and implementation, (iii) advocacy and engagement, (iv) partnerships and regional capacity development and (v) learning and accountability.

#### Evaluation scope

The temporal scope covers the financial years 2013-14 to 2017-18, with an emphasis on current capacity and performance, drawing on the most recent information available about relevant investments. The geographic scope is the Pacific, including Papua New Guinea (PNG).

The evaluation examines DFAT’s disaster preparedness and response investments in the Pacific, including dedicated protection programming and mainstreamed approaches, with no distinction between investments managed by HPD and country and regional programs.

The evaluation’s focus is on protection issues in the context of specific disaster responses in the Pacific, valued at above $3 million, for which at least one DFAT Aid Quality Check (AQC) or Humanitarian AQC (HAQC) has been drafted. These include the Solomon Islands flood response (2014-15), the Vanuatu Tropical Cyclone (TC) Pam response (2015), the Fiji TC Winston response (2016-17), the Papua New Guinea drought response (2015-17) and the Vanuatu volcano response and recovery (2017-18). At the time of writing, HAQCs are not yet available for the 2018 Tonga TC Gita response or the PNG Southern Highlands earthquake response.

#### Methodology

An inductive mixed methods approach including qualitative and quantitative methods has been taken. These methods include a wide literature review (over 75 documents), interviews (over 86 individuals), separate surveys of DFAT (9) and partner staff (17) and a field visit to one country (Fiji). The majority of interviewees and survey respondents were female (overall 78 female, 32 male and 2 unspecified). Data across these methods has been triangulated to enable the findings to inform the recommendations. Causal inference to make a finding has required a minimum of two sources across the methods. While the team has studied a limited number of investments and had access to more evidence for Vanuatu and Fiji than elsewhere, survey and interview questions have directed individuals to consider the region as a whole, and many clearly responded on the basis of their knowledge of a broader range of countries and responses. See attached annexes for further information on literature (Annex III), interviews (Annex IV), and survey results (Annex V).

#### Limitations and challenges

Limitations include the challenges of monitoring and evaluating protection activities generally. For this evaluation there were specific challenges, with broad protection commitments spanning several documents from 2013 to present. The lack of specific indicators and monitoring framework to track performance was a constraint, and there were challenges interpreting HAQC protection criteria that have changed over time. Many documents were requested of DFAT that were unavailable, including for the five relevant investments listed above[[4]](#footnote-5). This made it difficult to triangulate conclusions in H/AQCs.

The desk review undertaken of the five investments was heavily reliant on information within the H/AQCs. Four of the investments were assessed using an HAQC template, which includes a protection criterion. However, for the PNG drought response, a Final AQC template was used, which typically applies to multi-year development investments and does not include any protection criterion. The HAQC for the Solomon Islands flood response was of little value to this evaluation due to the adoption of a modified approach whereby ratings were agreed jointly during an internal discussion and then documented without explanatory text.

The Fiji mission provided insight into the Pacific regional preparedness and response capabilities as well as into domestic capabilities focussed predominantly on the 2016 TC Winston response. Unfortunately, the Fiji mission was limited to interviews in Suva with no field visit or consultations with government stakeholders or affected populations as originally intended. Further while several field missions were planned, only one field mission was conducted, which is an inherent limitation.

The decision to limit the scope to disaster response in the Pacific (reflected in the ToR) results in a high specificity of the findings. It is therefore not advisable to apply the findings and recommendations to other regions due to the focus on disasters, unique humanitarian architecture, limited operational presence of mandated protection partners and limited donor diversity.

The survey data is perception data from a sample of largely non-specialist respondents. The number of DFAT survey respondents was small (9) and all but one was female, yet several key decision-making roles for prioritising protection in humanitarian action are male. A larger number of DFAT staff were interviewed (28 including 9 males) and any possible gender bias has been partially mitigated by triangulating interview data.

There are significant challenges in understanding and tracking DFAT’s financial investments across the many different sources directly or indirectly supporting protection in humanitarian action including: the Australian Humanitarian Partnership (AHP); bilateral, regional and multilateral programs; HPD’s own programming; and programming directed at specific thematic areas like disaster risk reduction, resilience, gender equality and disability inclusion. For example, while it is known that approximately $14.5 million in total was invested by DFAT on humanitarian assistance in the Pacific in 2017-18 (for responses in Tonga, Vanuatu and PNG), it is not possible to determine what proportion was invested in dedicated protection programming or protection mainstreaming. Other donors face similar challenges in tracking protection investments across the various funding streams and distinguishing between mainstreaming and dedicated investments.

# 1. Normative Environment

Protection is grounded in **international humanitarian, human rights and refugee law** as per the IASC definition endorsed within Australia’s 2013 Protection Framework. National governments have primary responsibility for protecting their populations, and national legal frameworks related to disaster response, SGBV, child protection, sexual orientation and gender identity (SOGI) and disability, and relevant policies and service delivery capacity are highly relevant for advocacy and leveraging in a disaster. There is relevant normative guidance from the International Law Commission on the protection of persons in disasters, including the responsibility of the affected state to seek assistance where its national response capacity is exceeded and the duty of affected state not to arbitrarily withhold its consent to external assistance.[[5]](#footnote-6)

**Protection in humanitarian action is both needs-and rights-based** andrequires coherence with the humanitarian principles of impartiality, humanity, independence and neutrality. [[6]](#footnote-7)[[7]](#footnote-8) The **2010 Central Emergency Response Fund (CERF) lifesaving criteria explicitly include protection and human rights** and refer to the deployment of protection teams in disasters, strengthening of community-based protection mechanisms, provision of life-saving psychosocial support for people with specific needs and access to life-saving information.[[8]](#footnote-9) Despite this clear guidance, protection remains poorly resourced in early funding allocations, as reflected in the Global Protection Cluster (GPC) Funding Study[[9]](#footnote-10). The prioritisation and funding situation is worse in disaster response settings than in conflict and complex contexts, as reflected in the 2015 Whole of System Review (WoSR).[[10]](#footnote-11)

**Global discourse, policy and practice on the prioritisation of protection in humanitarian action continues to evolve**. The IASC cluster approach and transformative agenda escalated the discourse on prioritising protection. Significant processes were initiated in 2013 with the IASC Task Team on Protection Priority established, the IASC Principals issuing a Statement on the Centrality of Protection to all humanitarian action. This was followed by the commissioning of the WoSR (supported by Australia) and the subsequent development of the first *IASC Policy on Protection* that were published in 2015 and 2016 respectively.

**Global normative developments,** including the commitment to the **centrality of protection, reinforce the need for three levels of action** to effectively prioritise and operationalise protection in humanitarian action: a strategic overall approach that engages leadership; dedicated programs; and mainstreaming. An effective protection response involves leadership, protection specialists and other sector specialists.

**Operationalising protection in humanitarian action**

Figure 2 Three levels of action required to effectively operationalise protection in humanitarian action

The lessons and normative developments at the global level, including those of the International Law Commission (ILC), are applicable to Australia and its commitment to good humanitarian donorship. They provide evidence-based insight into the necessary shifts and investments needed within DFAT for more consistent prioritisation of protection in systems, processes and tools, including funding decisions.[[11]](#footnote-12)

**At a global level, recognition and prioritisation of protection in disasters has been a challenge.** The *2011 IASC Operational Guidelines on the Protection of People in Situations of Natural Disasters* supported the recognition of protection issues in disaster contexts. The 2015 WoSRhighlighted the lack of predictable leadership of the protection cluster in disaster contexts, and untimely/delayed deployment of dedicated resources in the Pacific, as well as general challenges with prioritisation of protection issues within the overall response and recognition of its life-saving nature.[[12]](#footnote-13)

Nevertheless, the International Federation of Red Cross and Red Crescent Societies (IFRC) global study *2015 Unseen, unheard: Gender-based violence in disasters* advanced recognition of protection risks in disaster contexts and resulted in a global resolution for the Federation which mandated all national societies to integrate prevention and response to SGBV in disaster preparedness and response. The *2015 Nansen Initiative on disaster-induced cross-border displacement* is increasingly relevant for climate-induced displacement risks in particular.

**There have been significant humanitarian system developments since the release of Australia’s 2013 Protection Framework** including the Grand Bargain commitments Australia and other donors made to localisation (including a 25 per cent target for funding local and national actors), the centrality of protection, leaving no one behind, and bridging the humanitarian-development divide. The Agenda for Humanity’s five-point plan (2016) outlines the changes needed to ensure that people’s safety, dignity and the right to thrive is placed at the centre of global decision-making”. [[13]](#footnote-14) Both the UN development and humanitarian systems have committed to **leaving no one behind** in line with the 2030 Agenda for Sustainable Development and the Agenda for Humanity. Exposure in early 2018 of sexual exploitation and abuse (SEA) by humanitarian workers against affected populations has triggered system-wide reviews of the effectiveness of compliance measures. Many standards relevant to protection have been championed by Australia. These include the Core Humanitarian Standard on Quality and Accountability (CHS); the recently revised Sphere standards and protection principles; and the Charter on the Inclusion of People with Disabilities in Humanitarian Action.

Despite significant global developments, commitments and discourse, **protection results remain uneven and elusive.** Relevant factors include: a lack of clarity on what protection is; weak M&E frameworks; geopolitical agendas and competing national interests; shrinking space for civil society and human rights; and the requirement for investment in pre-crisis capacity and resources to respond to what often amount to development deficits. This is further exacerbated by insufficient leadership and inadequate human and financial resourcing to adequately operationalise protection in humanitarian action. In July 2018, the GPC issued its second annual review of the centrality of protection in humanitarian action, which highlighted significant deficits across several crisis contexts.[[14]](#footnote-15)

**The Pacific context remains unique.** It is characterised by high cyclical disaster risks; cultural and linguistic diversity; and high levels of intercommunal and interpersonal violence, including SGBV. Violence increases post-disaster, including the exacerbation of pre-existing patterns and new risks, particularly in contexts of displacement, and comes at a high individual, social and economic cost.[[15]](#footnote-16) There is a need for ongoing dialogue on how the international system and cluster approach can function most effectively in support of national actors in this context. While the root causes and solutions for protection risks in disaster contexts are quite different to those in armed conflict and protracted crises, core normative sector standards and principles such as the centrality of protection continue to apply.

# 2. Coherence of approach and capacity to implement

**Australia’s Protection Framework** endorses the IASC **definition of protection**:

*All activities, aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (i.e. human rights, humanitarian and refugee law). Human rights and humanitarian actors shall conduct these activities impartially and not on the basis of race, national or ethnic origin, language or gender.*

**The core outcome of the Protection Framework** is to “improve the safety of people affected by natural and human-induced crises” through **two key strategies**:

1. support through funding and advocacy for dedicated and mainstreamed programs in preparedness, response and recovery
2. support and advocacy for improved global capacity in AAP, protecting people with disabilities and preventing and responding to GBV (refer to Annex I for a summary of the Framework).

**Enabling Outcome 1** of the Protection Framework refers to increased capacity among DFAT and its partners.

**Australia’s Humanitarian Strategy** commits to protection as one of five ‘thematic priorities’ central to the efficacy of Australian aid, alongside gender equality and women’s empowerment; disability inclusiveness; private sector engagement; and accountability and learning. DFAT’s commitments and guidance for protection are global in scope.

There is increasing attention to the **Women, Peace and Security (WPS) Agenda** in disaster preparedness and response, recognising the importance of investing in gender and diversity representative leadership, as well as the disproportionate gendered impacts in terms of deaths and increased risk of SGBV following disaster events.[[16]](#footnote-17)

**There is recognition in the Protection Framework of the need to ensure staff are able to “recognise protection issues and respond appropriately”** and that there should be activities to develop staff capacity including training and policy advice (see Enabling Outcomes within Annex I).

#### Analysis and findings

**Australia’s commitments and approach to protection are clear in so far as they relate to the Protection Framework’s global priority areas** of protecting people with disabilities, AAP and GBV prevention and response[[17]](#footnote-18). They are **not coherent in terms of supporting a broader protection response in the Pacific, and have not been updated to reflect current normative standards or global commitments**. There is poor articulation and appreciation of the broader protection needs in disaster preparedness and response, and the need for a timely protection risk analysis (see Annex VI). This analysis is particularly important in light of commitments to leaving no one behind.

The Protection Framework itself is not well known in DFAT, despite awareness of the priority areas within. For those aware of the Framework, its scope is not well appreciated and it is generally assumed not to be up to date. The term ‘protection’ was frequently used interchangeably with ‘gender’ and ‘disability inclusion’ during interview and field mission discussions. This strongly suggests the Protection Framework has received very limited institutional investment, notwithstanding the intentions stated within the document. It also strongly suggests that while specifying priority areas has served a useful purpose in terms of spurring action in these areas, it has tended to overshadow the need for broader protection risk and vulnerability analysis.

TheProtection Frameworkwas released in July 2013 by the former AusAID. Significant changes were made to Australia’s aid policy architecture shortly thereafter with the integration of AusAID’s functions within DFAT. These institutional changes are likely to have impeded the institutionalisation and subsequent operationalisation of the Protection Framework.

In the same year the Protection Framework was launched, the IASC issued a statement concerning the centrality of protection, stating the need for the “**protection of all persons affected and at-risk [to] inform humanitarian decision-making and response**”. But there remains a **limited recognition** within DFAT or partners **that a broader and rapid protection risk analysis for all affected populations should be undertaken to ensure no one is left behind** (see further Section 7).This is due to the intersectionality of vulnerability,[[18]](#footnote-19) which recognises that people have multiple identities and protection and exclusion risks are compounded by age, gender and diversity factors. In part, these shortcomings are a consequence of the focus on global priority areas and subsequent issue-based approach; typically disability inclusion and SGBV focussed on women and girls.

The survey conducted for this evaluation included the question: *Are Australia’s commitments and approach to protection in humanitarian action clear and coherent?* (See Annex V Survey Responses, table 1). Only one of the 22 individuals responding to this question gave a *Less than satisfactory* rating (a DFAT respondent). However, there are **significant inconsistencies between the survey perception data and interview and field mission data**, which present more negative perceptions on the part of DFAT staff and partners of the clarity and coherence of DFAT’s protection commitments and approach. The interview and field mission data are given more weight than the survey because there was greater opportunity to probe and inquire.

It is evident from interviews and DFAT practice that there is some **confusion between what constitutes dedicated protection programming** **compared to mainstreaming**, and insufficient recognition that there is a commitment to, and need for, both at the response level (Figure 2 refers).[[19]](#footnote-20) This finding reflects a limited technical understanding of protection programming within DFAT and also among most partners. There is further confusion in relation to child protection with DFAT’s **Child Protection Policy,** a safeguarding (risk management) policy, being frequently and misleadingly conflated with a programmatic child protection response. There is a need to address these conceptual confusions in DFAT documents and invest in the necessary capacity for staff. While there is a Child Protection in Emergencies Guidance Note, it was not well known among interviewees and exists in parallel to the 2017 Humanitarian Strategy Guidance Note on Protection (subsequently referred to as the Protection Guidance Note) (discussed in Section 7).

The Protection Framework recognises only two of the three interconnected levels for operationalising the IASC Principals commitment at Figure 2.[[20]](#footnote-21) Key strategy 1 of the Protection Framework refers to Australia supporting protection through mainstreaming and dedicated programs but makes **no provision for an overall strategic approach** that engages leadership and guides programming to ensure protection is central. During the evaluation, only one senior interviewee mentioned the importance of a strategic approach. Neither the Humanitarian Strategy nor its Protection Guidance Note adequately address strategic considerations.

Key strategy 2 of the Protection Framework outlines Australia’s priority support and advocacy for improved global capacity for AAP, protecting people with disability and SGBV prevention and response. Most interviewees considered these to be DFAT’s dedicated program priorities. But **while AAP is a critical and underserved area in the Pacific, it remains a key element of protection mainstreaming** and hence should be required of all humanitarian partners. The PGN acknowledges this but the conceptual confusion encountered suggests a revision of the Protection Framework and PGN, and associated capacity building to clarify needs across the three levels of action, including dedicated programming and mainstreaming.

DFAT survey respondents were asked to list **challenges for operationalising protection in humanitarian action**. The responses included (i) limited understanding of protection and how to apply it among DFAT senior management; (ii) staff over-burdened with an ever-expanding list of competing issues to consider; (iii) lack of in-depth protection analysis and expertise within DFAT and amongst the broader humanitarian community in the Pacific; (iv) ensuring adequate attention to protection in a response scenario (e.g. building it into DFAT's partnerships); and (v) the lack of a funding benchmark to ensure resourcing for protection is commensurate with commitments.

DFAT survey respondents were also asked to rate **DFAT’s investment in its internal capacity** to program and deliver protection in humanitarian action, including guidance, training, capacity development and timely access to quality in house technical advice. This question prompted the **lowest ratings of all survey questions**, with 6 of 8, or 75 per cent, of DFAT respondents rating DFAT’s investment in its internal capacity *Less than satisfactory* (Annex V, table 5). **The most common remark from respondents concerned the lack of technical protection expertise in DFAT (in HPD and at Posts) and amongst partners to program, implement and evaluate protection in humanitarian action in the Pacific**. Several survey respondents referred to the lack of systemic training of staff on protection (in contrast to training available on child protection safeguarding in particular).Several intervieweesidentified key activities and processes where access to dedicated protection expertise is needed (listed in Annex IV).

The relative **scarcity of technical protection expertise amongst partners** in the Pacific compounds the problem. AHP members and partnerships may have access to expertise in some aspects of mainstreaming, e.g. gender or disability inclusion, but not necessarily broader protection expertise to guide protection risk assessment, mainstreaming and dedicated programming. Theoretically, many can draw on international capacity but it is evident from their responses at interview that this is not embedded in their processes. At the time of writing, the Protection Guidance Note remains internal to DFAT. This situation appears to reflect insufficient resourcing to operationalise and institutionalise DFAT’s commitments and approach, and also the challenge of many competing priorities.

It is clear from UN and other partner interviews in Suva that the concept **‘protection’ is** **not well contextualised or understood amongst national stakeholders in the Pacific**. This confusion is reflected in the variously named clusters responsible for protection and also in the different lead ministries across the Pacific. A number of partners in Suva reported government actors do not understand the concept and often associate it with policing.

DFAT’s lead **donor role in the Pacific presents significant opportunities** in terms of strategic advocacy on protection and opportunities for advancing humanitarian-development nexus programming. There are also, however, challenges with DFAT’s current protection priorities as there is generally no other donor to complement or fill the gaps. There are also political challenges for DFAT, with a lack of nuanced humanitarian advocacy on gender equality, SGBV and child protection. This was reported by several interviewees as lacking a strategic approach and causing tensions with national actors.

There are **valuable lessons from other donors**, including DFID and USAID, which retain dedicated protection advisers at headquarters and, in the case of DFID, a crisis-level protection adviser for Syria. The European Commission’s Humanitarian Aid and Civil Protection department (ECHO) has a robust Humanitarian Protection Thematic Policy 2016 and matches its commitments to protection and financial investments with dedicated advisers for priority crises[[21]](#footnote-22). There are further lessons from Australian whole-of-government partners, such as the Australian Defence Force’s operationalisation of its commitments to the WPS Agenda through the deployment of a Gender Adviser for the 2016 TC Winston response and subsequent responses, including 2018 Ambae evacuation(s) in Vanuatu[[22]](#footnote-23). This was reported by several interviewees as having a positive impact on the prioritisation of, and attention to, gender and related protection issues. The potential for Australia Assists to deploy protection advisers in the Pacific region to fill strategic gaps has not been fully explored.

# 3. Prioritisation of protection in practice

The Protection Framework specifies a commitment to **“prioritise the safety and dignity of affected populations in line with internationally accepted standards”** and to “assess commitments and capabilities to mainstream protection and implement protection standards when selecting partners to deliver humanitarian assistance”.[[23]](#footnote-24) The Protection Framework also commits Australia to deliver assistance that “is based on a context analysis, including identifying the threats women, girls, boys and men are exposed to, their vulnerabilities and ability to protect themselves”.[[24]](#footnote-25) Prioritising safety, dignity and rights is not limited to humanitarian response, with a commitment to support protection “in preparedness for, response to and recovery from humanitarian crises”.[[25]](#footnote-26)

The Humanitarian Strategy refers to the Protection Framework and commits to integrating protection “throughout the design, implementation and evaluation of DFAT’s humanitarian policy and programming”. DFAT includes protection considerations in the scoring of proposals within the AHP.

Operationalising protection includes engaging leadership and decision makers, protection specialists, and providing support to other sectors with mainstreaming responsibilities. It also requires timely access to a contextualised protection risk analysis to inform decision making and to articulate a strategic approach to protection in each response. These aspects are not articulated in the Protection Framework, or in DFAT’s standard operating procedures (see further Section 7).

#### Analysis and findings

While the Protection Framework was not well known amongst DFAT interviewees or among partners, **there has been some operationalisation of the document.** This isparticularly evident for advocacy on disability inclusion and sexual and reproductive health issues, which are consistently prioritised in DFAT humanitarian response packages. DFAT’s perceptions of its progress in implementing the Protection Framework are mixed and at times contradictory.

While the **focus on global thematic priorities** has served a useful purpose by progressing action in these areas, in practice it has tended to mask the absence of sector standards to examine protection risks and vulnerabilities more broadly. It is also evident that DFAT’s focus on global capacity and prioritisation has not delivered results for AAP in the Pacific in particular and that global investments do not necessarily trickle down. AAP is further a mainstreaming rather than a dedicated programming priority.

**Prioritisation is not well supported** due to lack of timely access to a broader protection analysis to inform a more strategic approach and investments. DFAT relies heavily on partner systems, based on assumptions of in-house protection expertise and systems. Protection is not prioritised in DFAT’s initial response although it is addressed to some extent in programming for recovery. Both mainstreaming and dedicated programming are required, and there is a lack of adequate prioritisation for dedicated programs.

**Most DFAT survey respondents and all partner respondents gave a satisfactory rating** against the key evaluation question: *How appropriately and effectively does DFAT and its partners prioritise people’s safety, dignity and rights in different contexts?* (see Annex V, table 6). The positive survey ratings were corroborated with strong HAQC ratings, although they were contradicted by interview responses to the same question, where there was opportunity to ask probing questions.

All but one of the five HAQCs studied (see Evaluation Scope) rated investments as “4 - *Adequate quality”* against the criterion: *Is the investment protecting the safety, dignity and rights of affected people?* The exception was the HAQC for the Vanuatu TC Pam response – “3 - *Less than adequate* *quality*”. **However, none of the four “4 - *Adequate quality”* HAQC ratings were well supported by the evidence and analysis** **presented** (see section 7). Evidence seems to be lacking in several areas for each HAQC, including that a timely protection analysis was undertaken and/or that a protection strategy or strategic approach was articulated.

Several survey respondents and interviewees highlighted challenges with the **prioritisation of protection in the initial rapid funding package for a response**.[[26]](#footnote-27) This challenge is reflected in the broader literature on humanitarian action and is correlated with the widely varying preparedness capacity of the protection clusters across the Pacific based on interview and field mission data. Several DFAT interviewees suggested that it was unrealistic to prioritise protection in the first instance, and referred to DFAT’s ‘no regrets’ approach in releasing and forwarding emergency stores, as well as a lack of influence over distributions in certain contexts. One senior DFAT interviewee stated that it is not that it is unrealistic to prioritise protection in the first instance; the difficulty is that DFAT has not undertaken the relevant preparedness work (protection analysis, planning and personnel) in the same way that supplies have been pre-positioned for example.

DFAT’s implementing partners found that protection was not **prioritised in the immediate response to** **TC Winston (2016)**: “The initial response was focused on meeting urgent needs and did not consciously focus on the participation of women or vulnerable groups …”[[27]](#footnote-28) There were also issues with the timeliness of analysis and accountability mechanisms. Live & Learn and CARE Australia completed a rapid gender analysis three weeks after the cyclone hit Fiji and their ‘complaints and referral’ mechanism was only functioning by the third month.[[28]](#footnote-29) Furthermore, a DFAT-supported needs assessment of people with disabilities did not become available until the fourth month (June 2016). The Fiji Safety Protection Cluster Inter Organisation Assessment Report was then published in July 2016. The cluster’s report was based on an adaptation of a global Child Protection Rapid Assessment Tool. While a useful analysis, the lack of timeliness and ability to influence the initial response was a considerable limitation. While there is some mention of broader protection risks, a thematic focus on ‘women and children’ is evident.

In separate interviews, two DFAT personnel said ‘protection is addressed when we have time to do so’, despite understanding that **protection risks are present from the outset, reflected in pre-existing power dynamics as well as people’s vulnerabilities and capacities**. In broad terms, some of these risks can be predicted from the age, gender and diversity characteristics of the affected population. For example, it is known that up to 17 per cent[[29]](#footnote-30) of people in the Pacific have a disability and a minimum of 5 per cent will be from a diverse sexual orientation and gender identity. Patterns of violence, including SGBV, are often also well documented. The challenge is to integrate a better understanding of these protection risks into preparedness efforts and concretely inform the initial funding package. The key is timely and comprehensive rather than single issue-based analysis, recognising the intersectionality of vulnerability and exclusion risks.

Prior understanding and agreement on **principled, inclusive and safe distribution protocols** need to be established with first responders (i.e. national governments, local authorities and community based organisations). DFAT should also gain a **better understanding of what happens to humanitarian emergency supplies** provided for distribution,and the associated exclusion risks. This requires real time monitoring of distributions.

There appears to be a **correlation between gender and decision-making** positions and the prioritisation of protection in the initial response based on the interview and survey data. Several interviewees reported difficulty with internal prioritisation within DFAT to ensure the consistent inclusion of sexual and reproductive health (SRH) packages in initial response packages. There are lifesaving SRH needs across all response scenarios. This finding exists in parallel to prioritisation barriers external to DFAT. This evidence supports the need for access to technical support and high level training, and greater attention to gender and diversity in leadership and decision-making positions.

While gender and disability inclusion must be integrated into AHP response proposals, there is **limited attention paid to the other important mainstreaming consideration of AAP, or critically the encouragement of dedicated protection programming**. Several AHP organisations said they believe DFAT’s investments in dedicated protection programming are inadequate. DFAT’s Office of Development Effectiveness (ODE) evaluation of Australia’s response to TC Pam stated that while DFAT was proactive in ensuring protection was mainstreamed, especially in relation to the work undertaken by AHP organisations, protection was less well supported by dedicated programs, which were limited to a small allocation for SRHR services.[[30]](#footnote-31)

DFAT’s funding for dedicated protection programming in disaster response appears to be increasing as a percentage of funding. It was reported in the HAQC for TC Winston (2016) that approximately 5 percent of funding was allocated to specific protection activities with United Nations Population Fund (UNFPA) and International Planned Parenthood Federation (IPPF). The management response stated that this was a larger proportion than in previous responses. Interviews suggest it has increased further in more recent responses.

**Progress in meeting thematic and other specific commitments** has been most significant in relation to SGBV as operationalised through sexual and reproductive health services and dignity kits provided through UNFPA and IPPF partnerships. Survey and interview respondents acknowledged that SGBV prevention is a strong policy commitment for DFAT and personal commitment of many DFAT and partner staff. The majority respondents (80 per cent) believe DFAT’s support and advocacy for SGBV prevention and response is *Adequate* or *Good quality* (Annex V, table 8). Some pointed out, however, that DFAT’s SGBV prevention and response programming in a disaster response is modest and its impact therefore questionable. There are also significant gaps in systems and specialised services for SGBV, as well as for child protection and disability inclusion that require multi-year development investments. Furthermore, these services are concentrated in urban centres.

Multiple specialists interviewed stated that Suva is considered the ‘gold standard’ for access to services compared to other areas in the country and the broader region. Interviewees also identified the potential to better utilise Fiji’s technical capacity on SGBV to support other PICs, noting there remain gaps for a comprehensive multi-sectoral and survivor-centred SGBV response even within Fiji.

All but one survey respondent from DFAT believe support and advocacy for **disability inclusion** is satisfactory and a majority gave a high rating (Annex V, table 9). This is a more positive assessment than the feedback received from interviews and from an examination of HAQCs. While there was evidence of robust advocacy for disability inclusion, and relationships have been formed with DPOs in the Pacific, there was little evidence of specialised programs with a protection lens for people with disabilities. Some of the reasons for shortcomings put forward by survey and interview respondents from DFAT include the lack of: expertise, appropriate partnerships, and technical support. Partner responses highlighted the need for: additional resourcing; an increased understanding of what disability inclusion involves; a strategic and systematic approach; more engagement with DPOs; and DPO capacity building. Positively, the AHP and its Disaster Ready component are making an important contribution to reducing these shortcomings.

**AAP is a significant gap in DFAT’s programming in the Pacific**. Half of DFAT survey respondents believe DFAT’s support and advocacy for AAP is less than satisfactory (Annex V, table 7). It is evident from HAQCs that DFAT’s focus is on complaints and feedback mechanisms, yet access to timely information and meaningful consultations with affected populations are two additional inseparable elements of AAP. An effective complaints and feedback mechanism requires these inputs to support timely identification of, and potential response to, protection concerns. In terms of increasing attention to the prevention of sexual exploitation and abuse (PSEA), the quality of the mechanisms and their ability to safely and confidentially handle such complaints requires review and investment.

Partner survey responses concerning DFAT’s engagement in AAP were more positive than those of DFAT staff, with two thirds rating DFAT’s support and advocacy for AAP satisfactory. There may be institutional self-interest bias here recognising that **meaningful AAP measurements require significant investment** by partners. The few negative responses stated that while AAP is clearly a priority for DFAT, accountability is not being achieved. Reasons given include that AAP is not well understood, difficult to implement and under-resourced. DFAT’s individual partners evidently make concerted efforts to be accountable to affected populations, however, a more coordinated and comprehensive approach is required[[31]](#footnote-32). DFAT has contracted the Communicating with Disaster Affected Communities (CDAC) Network and Ground Truth Solutions to map capacity and opportunities for better AAP in Fiji and Vanuatu. Further work with, and in support of, local organisations is needed.

Compliance with DFAT’s **child protection** policy requirements appears to be high. DFAT received praise from specialists interviewed on the child protection reporting requirements within the current compliance policy. This was reported to reduce internal organisational pressure that impacts the effectiveness of reporting mechanisms. These are potential lessons for the broader PSEA reviews ongoing at the time of this evaluation.

But compliance measures should not be conflated with investment in dedicated child protection programs. DFAT needs to pay more attention to **dedicated child protection programs** in humanitarian response and broader programming to strengthen the child protection systems in the environments in which DFAT’s humanitarian work is undertaken. It is recommended DFAT review its partnership with UNICEF to better understand what its core funding is supporting, and where there may be gaps.

The survey asked DFAT respondents the extent to which DFAT is applying good practice to safely and confidentially prevent and respond to allegations of **sexual exploitation and abuse** against members of affected populations by staff, partners or contractors. Most indicated “do not know”. Of the five that responded to the question, three rated the question *Less than satisfactory*, indicating some concern about the department’s awareness and application of PSEA (see Annex V, table 10). There are significant issues, including a lack of adequate information provision, awareness and consultations to understand the risks in line with sector standards, as well as an absence of safe and confidential complaints mechanisms based on the (interview and literature data). Effective PSEA mechanisms are dependent on investments in AAP and the integration of a do-no-harm lens to ensure the protection of sensitive information, to avoid possible reprisals (harm) to those making a complaint and, most importantly, to take a survivor-centred approach that prioritises the safety and referral needs of victims In line with their wishes.

There is a need for DFAT to **nuance its increased attention to** the needs of people with diverse **sexual orientation and gender identities** and for a more explicit do no harm approach in particular. LGBTI will be among affected populations (comprising a conservative 5 per cent according to Edge Effect), have specific needs, are at higher risk of exclusion and discrimination and subsequently need more targeted measures to ensure their inclusion in preparedness and response measures. There is a need for sensitisation for all humanitarian actors and to find appropriate mechanisms to support partnerships with local actors specialised in LGBTI issues to facilitate safe and dignified inclusion.

# 4. Advocacy and engagement

**Advocacy is built into the Protection Framework’s key strategies**, including advocating for protection to be mainstreamed into humanitarian action; dedicated protection programs; improved global capacity for AAP; protecting people with disability; and preventing and responding to SGBV. The Protection Framework’s commitment to “prioritise the safety and dignity of affected populations in line with internationally accepted standards” requires strategic advocacy and engagement, but the actions and nuance required for the Pacific have not been articulated in DFAT policies, programs and procedures, e.g. in the Pacific Humanitarian Strategy. Australia’s Humanitarian Strategy makes general reference to promoting international norms and refers to the Protection Framework which as noted includes provision for protection related advocacy. [[32]](#footnote-33) [[33]](#footnote-34)

**‘Policy advocacy and engagement’ is addressed in the Protection Guidance Note**, where the key action is: ‘Encourage partner governments and organisations to consider protection, gender and inclusion at all stages in humanitarian response.’ The practical steps listed include Post regularly engaging with the host government to advocate on protection as appropriate to the in-country context; raising protection questions in country as part of crisis planning and preparedness processes; and participating in protection clusters.

**Humanitarian action and good humanitarian donorship commitments require respect for humanitarian principles and minimising the interference of political imperatives in humanitarian assistance and decision-making**[[34]](#footnote-35). The Protection Framework was developed under the former AusAID, which was somewhat removed from the broader political imperatives of DFAT. The challenge now is to maintain a principled approach while capitalising on more direct access to Heads of Mission, their contacts and private advocacy capabilities.

#### Analysis and findings

DFAT is fortunate to be a lead donor in the Pacific unlike other regions where there is much more donor diversity. DFAT’s lead **donor role in the Pacific presents significant opportunities** for strategic advocacy on protection and coherence in advancing programs in the humanitarian-development nexus. **DFAT already has a positive reputation for advocating on particular protection priorities globally and in the contexts of responses in the Pacific**. This came out strongly in survey responses. Partners were positive about DFAT’s support for, and engagement with, national protection clusters. In practical terms, DFAT’s advocacy focusses on gender equality, disability inclusion, SRHR, as well as mainstreaming. Survey and interview data consistently pointed to this.

**While DFAT advocates for, as well as operationalises SRHR, DFAT appears very reticent to conduct bilateral humanitarian advocacy** **on other politically sensitive protection issues**. In survey responses and interviews, several partners said that while they are not aware what DFAT advocates behind closed doors, they are unsure of DFAT’s willingness to undertake bilateral humanitarian advocacy questioning national processes and practices. DFAT respondents confirmed DFAT has limited visibility over the final distribution of Australian-funded supplies, and acknowledged the risk that distributions might exclude certain groups and/or minorities. The evaluation of DFAT’s response to drought in PNG found that from a humanitarian advocacy perspective it should be rated 3 –- *Less than adequate quality* because Australia did not advocate for a principled approach to prevent exclusion risks. [[35]](#footnote-36) This is anecdotally (based on interview data) said to contrast with Australia’s more recent earthquake response support in PNG , for which an HAQC report has not yet been completed. Investing in AAP will help to some extent, but DFAT will still need to assess exclusion risk and advocate for impartiality prior to the distribution of Australian-funded supplies.

The evaluation of Australia’s response to TC Pam commissioned by ODE found that: “working under the direction of the Vanuatu Government, as it implemented its policy of equal treatment of all affected communities, constrained Australia’s ability to target assistance to the greatest needs and meet strategic objectives in relation to gender, disability inclusion and protection.”[[36]](#footnote-37) The evaluation recommended: “Working with partner governments ahead of, and during, a crisis to identify how assistance can be targeted to those most in need.”[[37]](#footnote-38) The DFAT management response expressed a willingness to advocate for protection and the needs of vulnerable groups. DFAT’s action plan refers to preparedness measures, including providing advice and support to Pacific posts on protection, and targeting of support through working-level training, briefing of incoming Heads of Mission and broader liaison.

Since the World Humanitarian Summit, in an environment of increasingly assertive host governments and commitments to localisation, little can realistically be achieved by DFAT in relation to protection without the **support of national stakeholders**. Advocacy on child protection and SGBV prevention and response requires careful and considered nuance and it is not necessarily effective or appropriate to initiate sensitive conversations with national and local actors in the midst of a response. Such advocacy was reported to be ineffective during the recent TC Gita response based on interview and field mission data. This highlights the need for a more strategic and longer term approach to principled advocacy and engagement. It also indicates Australia should seek opportunities to build and leverage partnerships with civil society to work on longer term changes in socio-cultural norms.

Increased attention to LGBTI inclusion was welcomed both within DFAT and among partners interviewed which further supports a broader age, gender and diversity approach to protection risk analysis (see Annex VI). LGBTI inclusion and protection is at a nascent stage and requires further investment through more strategic advocacy and partnerships. A cautious approach is required that supports and does not undermine local civil society and coping mechanisms.

# 5. Partnerships and regional capacity development

According to the Protection Framework, Australia’s partners are expected to have the capacity to develop and apply appropriate protection standards in order to be funded. However, the Framework also recognises the need to **help partners increase their capacity** to “deliver effective protection”[[38]](#footnote-39).

**DFAT’s main global protection-mandated partners, the International Committee of the Red Cross (ICRC) and UNHCR, have limited operational presence in the Pacific**. In the absence of this operational capacity and expertise, DFAT has partnered with UN Women, a relatively new UN agency dedicated to gender equality and women’s empowerment.Interview and field mission data suggest that **protection cluster capacity** varies greatly across the region, with Vanuatu reportedly the most effective.

#### Analysis and findings

Through Disaster Ready, the AHP supports partner organisations’ protection activities in preparedness for disasters. On the other hand, most AHP organisations surveyed **believe DFAT does not provide adequate support** in a disaster response to help them meet protection programming and mainstreaming expectations. A common view is that specific funding should be provided by DFAT to increase their technical protection capacity and to undertake protection-related activities, e.g. assessments.

Some survey respondents and interviewees noted stronger investment in **protection surge capacity** could be encouraged, via the Gender Standby Capacity Protect (GenCap), Protection Standby Capacity Project (ProCap) and Australia Assists/ RedR rosters and training. Australia Assists offers the potential to deploy protection specialists for both preparedness and response at regional and country levels. Longer term deployments in support of regional and national stakeholders are encouraged, e.g. working with regional organisations and national disaster management offices to better contextualise and operationalise protection for the Pacific. [[39]](#footnote-40)

Nearly one third of DFAT and partner survey respondents indicated DFAT does not fund **appropriate partners** to meet protection commitments (Annex V, table 13). For DFAT respondents the main point was that DFAT has invested primarily in global partnerships for protracted crises but needs to do more to identify appropriate regional and local partners for rapid onset disaster response in the Pacific. The ODE-commissioned evaluation of TC Pam concluded: “Australia’s response did not fully identify or utilise opportunities to work with established national and local civil society organisations.”[[40]](#footnote-41) Some survey respondents and several interviewees called for expanding investment in **local and faith-based partnerships, recognising their strategic importance in the Pacific,** while also balancing the need to mitigate exclusion risks associated with some faith-based actors’ management of temporary shelters.

# 6. Preparedness, localisation and humanitarian-development nexus

DFAT has made **significant commitments to humanitarian reform** including bridging the humanitarian-development divide. It is guided by the 2030 Agenda for Sustainable Development – which includes the Sendai Framework for Disaster Risk Reduction – to strengthen resilience, reduce the impacts of natural hazards and improve preparedness and response. DFAT’s Grand Bargain and localisation commitments require that 25 per cent of its global humanitarian funding be provided to national and local responders by 2020**.**

Preparedness, localisation, and the humanitarian-development nexus are integrated into the Protection Framework and the Humanitarian Strategy in **relatively simplistic terms**. The ProtectionFramework commitment is to support protection “in preparedness for, response to and recovery from humanitarian crises”[[41]](#footnote-42). It makes only a brief reference to the link to development. [[42]](#footnote-43)

#### Analysis and findings

Several DFAT interviewees supported strengthening protection preparedness. Practically, protection can be incorporated into resilience programming, including social safety nets. Long term multi-year investments can deliver results, as demonstrated by over three decades of Australian investment in Fiji Women’s Crisis Centre and the regional and national leadership role it plays in a critical protection area. 

The standing agreements with UNFPA and IPPF are a practical manifestation of protection mainstreaming for SRHR in preparedness. DFAT also funds partners who manage stand-by registers of humanitarian professionals, such as ProCap, GenCap and RedR Australia. These stand-by registers include protection professionals. **Disaster Ready** and AHP’s shared services are a positive contribution to preparedness and are enabling AHP members to help each other put a gender, disability inclusion and child protection safeguarding lens over their internal policies and preparedness activities.

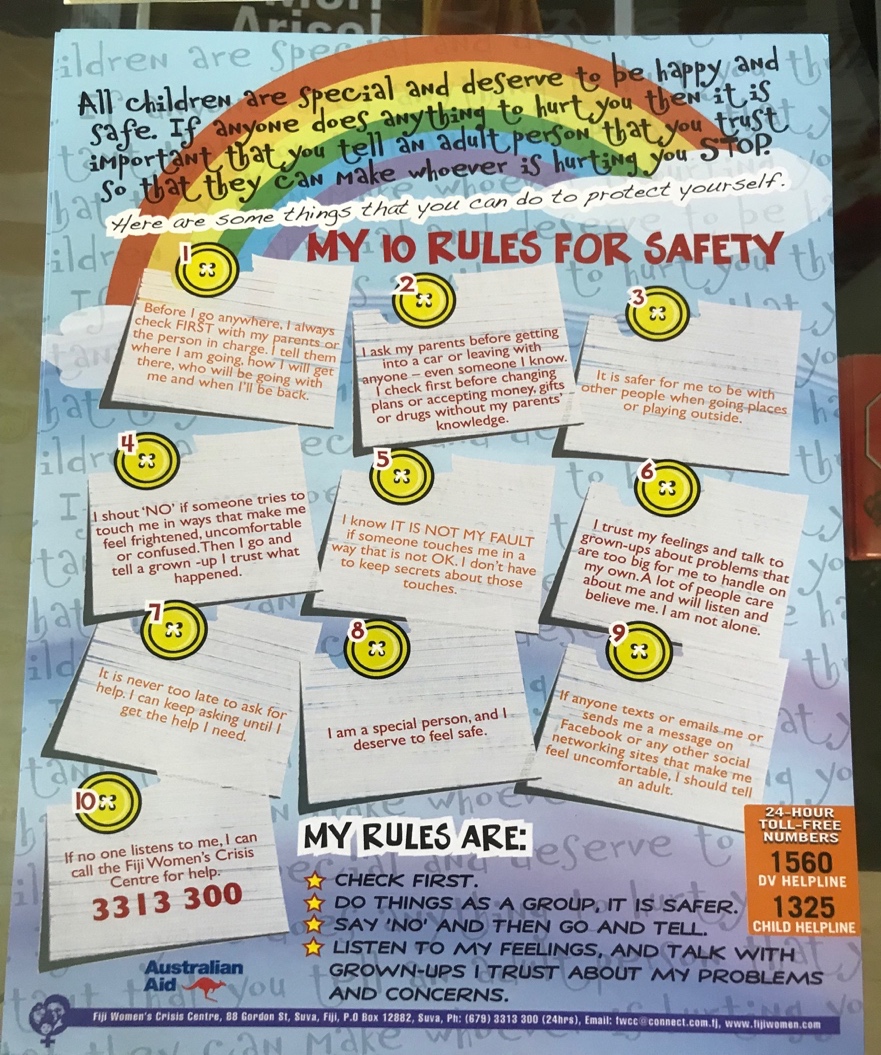
However, there are **substantial preparedness gaps,** including insufficient attention to broader vulnerability and protection risk analysis pre-disaster. Considerable potential exists to address this with current information including from: the UNICEF Multi Indicator Cluster Survey (MICS), national Family Health Surveys and equivalents, UNICEF disability

Picture of Fiji Women’s Crisis Centre SGBV prevention poster. Photo credit: Amra Lee 2018.

country level analysis, LGBTI reports, OHCHR, reports and within DFAT (e.g. country human rights profiles).

Survey respondents were asked to what extent DFAT’s policy and approach to protection adequately articulates and supports the **link between humanitarian and development programming**.The majority of DFAT respondents rated this unsatisfactory (Annex V, Table 4). While DFAT has supported research on **localisation and protection**, there is less evidence of practical commitments to addressing the humanitarian-development divide in protection programming in the Pacific. [[43]](#footnote-44) There is significant potential for DFAT as a lead bilateral and humanitarian donor to advance its commitments in this area.

**A nuanced approach to localisation** is necessary, taking account of DFAT’s commitments and the Pacific context. In practice, protection responses require both international and national expertise, leveraging each other’s capacity and strengths. While it is positive that PIC governments lead the standing protection clusters, in practice they do not appear to be meeting regularly or undertaking the necessary advocacy to influence other actors and decision-makers, with the exception of Vanuatu. Interview data found national stakeholders generally have a strong belief that their systems are already fit for purpose and are reluctant to meaningfully engage in the cluster approach due to it being seen as an internationally led system.

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Picture of Fiji Women’s Crisis Centre safety rules for children poster. Photo credit: Amra Lee 2018.

# 7. planning, M&E, learning and accountability

#### Overview of DFAT’s relevant frameworks, processes and tools

***Planning***

DFAT has standard operating procedures (SOPs) for developing and approving **Humanitarian Emergency Response Plans** for medium- to large-scale responses. [[44]](#footnote-45) The SOPs for response plans make no explicit reference to the need for a broader protection risk analysis and protection strategy.

The Australian Government’s Inter-Departmental Emergency Task Force is required to specify a ‘statement of strategic intent’. For the Vanuatu Ambae evacuation, this included a reference to funding local and Australian NGOs for protection activities. Although there isno formal requirement that DFAT articulate a protection strategy for a response, **evidence of appropriate strategic approaches to protection forms part of the overarching consideration for rating the protection criterion in HAQCs**.[[45]](#footnote-46)

***Policies and guidance***

**The Protection Framework refers to broad protection standards but does not provide indicators, benchmarks or targets against which to track progress**. The Humanitarian Strategy includes a Performance Assessment Framework (PAF) but no indicators, benchmarks or targets either. Protection is treated as a cross-cutting issue in the PAF. The only reference to protection in the PAF outcomes is in relation to conflict-affected populations.[[46]](#footnote-47) The Pacific Humanitarian Strategy (2017) does not include a PAF and incorporates protection under recovery only.

The Humanitarian Strategy is now supported by several **guidance notes**, available on the DFAT intranet, including the 2017 Protection Guidance Note. The stated objective is to ensure that protection is central to all DFAT humanitarian action and initiatives. It includes brief but helpful guidance on developing indicators for an investment/program.

***Performance and quality tools***

**The joint New Zealand Ministry of Foreign Affairs and Trade (MFAT) - DFAT Humanitarian M&E Framework** for the Pacific (the MEF) launched in 2018 is based on six strategic result statements and includes indicators, tools and guidance, including for real time application. [[47]](#footnote-48) The MEF’s use to date has been limited but this appears to be fast changing. Protection, including the centrality of protection and three levels of action needed to effectively operationalise protection, needs to be strengthened in the tools.

**The HAQC** is the most significant learning and accountability process for DFAT’s humanitarian response investments. The HAQC includes the protection criterion: *Is the investment protecting the safety, dignity and rights of affected people?* The associated Ratings Matrix highlights the importance of articulating and implementing protection strategies. **DFAT’s Partner Performance Assessments and Multilateral Performance Assessments** are also relevant tools.

DFAT’s current practice is to include at least two humanitarian action related evaluations in the **Annual Aid Evaluation Plans**, including this evaluation, the first to focus on protection. The ODE evaluation of DFAT’s response to TC Pam in Vanuatu finalised in February 2017 was helpful for this evaluation.

***Accountability***

The Protection Framework includes undertakings to report progress against commitments biennially, and to discuss progress and lessons learned with partners (see Enabling Outcome 2, *Australia’s protection in humanitarian action is accountable*). Neither appear to have been actioned. Interview data referred to the AusAID-DFAT integration process and subsequent lack of clarity on the Protection Framework’s status as reasons for lack of adherence to these commitments.

#### Analysis and findings

***Planning***

**Protection is not prioritised in DFAT’s SOPs** for medium to large-scale humanitarian responses. It is inferred from DFAT interviews and the HAQCs studied that DFAT does not believe it is necessary to articulate or endorse a protection strategy to shape its responses in the Pacific or to guide funded partners. In the absence of this, it is assumed that partners will undertake or have access to protection assessments and, on this basis, will develop their own protection strategies.

**DFAT does not appear to have had consistent or timely access to a comprehensive protection risk analysis** for any of the Pacific responses studied.[[48]](#footnote-49) Partners and the cluster undertook some assessment and analysis for TC Winston (2016) but this was not comprehensive or timely. Evidence reviewed includes: a wide literature and HAQC review; field mission; and survey and interview data. **Where assessments are referenced in proposals from partners, they are sub-sector or issue specific**. Some partners undertake related analysis, such as CARE Australia’s pre and post gender analysis. National protection clusters are not presenting timely assessments or analysis.

Timely access to a broader protection risk analysis is necessary to inform DFAT’s strategic approach and to assist partners that do not have access to expertise. The absence of a clearly communicated strategic approach was raised in the ODE evaluation of the TC Pam response.[[49]](#footnote-50) It is not the role of a donor to lead the development of a protection strategy, which requires technical protection expertise. However, there is a gap that impacts DFAT’s ability to understand the broader protection context and deliver on its protection commitments as a first responder to crises in the Pacific region.[[50]](#footnote-51)

Protection analysis and planning should be formally incorporated in **Humanitarian Emergency Response Plans** and these plans should be conveyed to partners. The ODE-evaluation of the TC Pam response found that: “Coherence would have been improved if DFAT had articulated an action plan for the response to provide a common sense of purpose for the overall assistance package.”[[51]](#footnote-52) Ongoing real time assessment, monitoring and revision of plans are required across humanitarian responses and into early recovery and preparedness.

***Performance and quality tools***

The **leading issue for Australia’s protection activities is the lack of application of existing procedures and tools**. The poor application of formal procedures and tools is essentially a human resourcing issue, requiring necessary time, capacity building and access to necessary protection expertise.

The evaluation finds that **M&E, learning and accountability in relation to protection is not robust or fully fit for purpose**. This finding is corroborated by the majority of DFAT survey respondents who rated the robustness of DFAT’s M&E, learning and accountability processes as *Less than satisfactory* (see Annex V, table 16). Key factors mentioned to justify ratings included a lack of understanding of protection in DFAT and a lack of technical support.

An operational weakness evident from HAQCs and interviews is that DFAT undertakes **very limited monitoring in the Pacific**, particularly in the initial response and none by specialist staff or advisers. DFAT relies on the expectation that partners will mainstream protection and hold themselves accountable to affected populations, without verifying this.

The development, piloting and recent use of the MEF is evidence that DFAT is cognisant of the need for better real-time monitoring to manage its disaster responses, and it is positive that protection is referenced. However, the **inclusion of protection is *ad hoc* and inconsistent across MEF tools and guidance** and an audit is required to ensure adequate treatment. It would be helpful for DFAT to develop specific protection guidance to support MEF monitoring tools.

A majority of DFAT survey respondents rated the **evidence-base for assessing protection in the HAQCs** as *Weak* (see Annex V, Survey results, table 18). The reasons given included significant limitations in the availability of data, reliance on partner self-reporting with no/minimal verification process, and a poor understanding of protection in sudden-onset crises beyond the priority areas of the protection framework. This corroborates the assessment of the evidence presented in HAQCs. The rating 4 - *Adequate quality* given for the protection criterion in HAQCs for the following investments is poorly justified by the evidence or analysis presented: Solomon Islands flood response (2014-15), Fiji TC Winston response (2016-17) and Vanuatu volcano response and recovery (2017-18). The protection criterion rating of 3 - *Less than adequate* *quality* given for the Vanuatu TC Pam response (2015) is appropriate. The evaluation team found, consistent with DFAT survey responses, that the justifications for protection criteria ratings were overly reliant on reporting from a limited number of (typically AHP) organisations and reflect a lack of rigour and a limited understanding of protection.

***Policies and guidance***

**While the Humanitarian Strategy Guidance Note on Protection is available on the intranet, few staff seem to have accessed it**. The majority of staff interviewed were unaware of it. Staff at Suva Post confirmed they were not familiar with it. There is no evidence that protection indicators specified in the Protection Guidance Note have been applied to humanitarian action in the Pacific.

***Accountability***

DFAT may need to articulate a **regional protection strategy** and protection targets across the three levels of actions (strategic, dedicated, mainstreaming) to provide a reasonable basis for accountability to affected populations, national actors and the Australian public.

**In the absence of a “protection marker” or “protection indicators” it is difficult to track financial investments in protection** across the many funding mechanisms, including bilateral and regional programs, Posts’ Pacific Response Fund, HPD and multilateral streams (including UNICEF). This is relevant as funding allocations can offer some indication of whether protection is being prioritised, where and how.

# 8. Conclusions, lessons AND recommendations

#### Summary of key findings

**Normative environment**: Australia’s commitments and approach to protection are clear in so far as they relate to key strategy 2 of the Protection Framework, namely that “Australia supports and advocates for improved global capacity for protection” in the priority areas of AAP, disability inclusion and preventing GBV. They lack coherence in terms of supporting a broader protection response in the Pacific and may require updating to align with the revised global normative standards. See Recommendations 2 and 4.

**Capacity to deliver on commitments**: DFAT has not adequately invested in its capacity to strategically prioritise protection commitments. DFAT lacks expertise within HPD and at Pacific posts to prioritise and evaluate protection in humanitarian action in the Pacific. More robust results in protection require investment in institutional capacity, including leadership and staffing, and may hinge on timely access to dedicated expertise. There are lessons from other donors in this regard. See Recommendations 1 and 2.

**Prioritisation of protection in practice**: DFAT and its partners have partially prioritised people’s safety, dignity and rights by focusing on particular categories or vulnerabilities of the people affected by a disaster. However, there is a lack of an overall strategic approach and comprehensive protection risk analysis (and response), which recognises that risks are intersectional and compounded by age, gender and diversity factors. See Recommendations 1, 2, 4 and 5.

**Advocacy and engagement**: DFAT has a positive reputation for global advocacy. Practically, however, DFAT has not appropriately or effectively undertaken protection-related advocacy and engagement in the Pacific region. DFAT appears reluctant to engage in bilateral humanitarian advocacy on difficult humanitarian issues. See Recommendations 3 and 6.

**Partnerships and regional capacity development:** DFAT faces partnership challenges in the Pacific, which is compounded by the lack of protection actors relied on elsewhere. There is a need to refine UN and INGO partnerships to deliver value-add in the Pacific and better leverage this for meaningful empowerment of national partners. See Recommendations 3 and 5.

**Preparedness, localisation and the humanitarian-development nexus:** DFAT has made progress with regards to protection in preparedness through its support for UNFPA, IPPF and ProCap (there has been a ProCap deployment to the Pacific). The AHP Disaster Ready program with its focus on the Pacific region is a positive contribution to this agenda. However, there remain substantial preparedness gaps related to broader protection risk analyses pre-disaster, as well as in relation to AAP, PSEA and community-based investments. A nuanced approach to localisation is necessary, recognising that protection responses require both international and national expertise. See Recommendation 5.

**Planning, M&E, learning and accountability:** DFAT’s protection-related planning, M&E, learning and accountability processes do not adequately convey or support the centrality of protection in humanitarian action. Initial disaster responses do not take a sufficiently strategic approach to protection concerns and appear to suffer from a lack of timely access to protection analysis. M&E and learning processes are not clear or robust on protection (Figure 2, page 4). Accountability for current commitments is largely absent. See Recommendation 4.

#### Recommendations for DFAT management

***Recommendation 1: Increase access to timely protection expertise and comprehensive protection risk analysis***

***Suggested options for implementation:***

1. **Review resourcing options for access to dedicated protection expertise** *(noting a combination of options may be needed*) including(i) adedicated protection role in HPD Canberra with significant focus on the Pacific and/or a role based in Suva with a regional focus; (ii) engagement of contracted technical expertise through a competitive selection process; and/or(iii) *s*trategically deploy Australia Assists protection specialists into key roles and/or organisations including regional bodies. **Annex VI** highlights activities and processes identified during the evaluation that would likely benefit from access to dedicated expertise.
2. **Invest in timely broader protection risk analysis** that integratesexisting information resources and supports a broader age, gender and diversity approach, including the LGBTI community. [[52]](#footnote-53) Protection profiles could be undertaken by DFAT as part of crisis preparedness (see **Recommendation 5**) and updated at the onset of a crisis.

***Recommendation 2: Recruit and support senior protection champions within DFAT and invest in staff capability***

***Suggested options for implementation:***

1. **Establish protection champions within DFAT** through targeted high-level support to leadership in Canberra and at Pacific Posts on the centrality of protection and humanitarian principles.
2. **Invest in core knowledge** and competencies for DFAT staff (principally through training).

***Recommendation 3: Engage more strategically with national stakeholders on operationalising protection in the Pacific, and identify the most appropriate mechanisms and partnerships to address protection gaps***

***Suggested options for implementation:***

1. **Contextualise protection for the Pacific** through regular bilateral dialogue with national actors including government, civil society and communities to support **a broader and more strategic approach** to protection. Consider strategic engagement and advocacy within the FRANZ framework or in cooperation with MFAT.
2. **Advance protection and localisation** through investing in regional and country-country capacity. Consider expanding partnership modalities **through establishment of a local consortium of civil society** to develop a more integrated (rather than issue based) approach to protection risk analysis and response. Consider expanding AHP and/or other funding mechanisms to bring in specialised protection actors absent in the Pacific, including for AAP. DFAT could invite proposals for protection and localisation projects including from within the AHP.
3. **Review and refine existing UN and INGO partnerships**, including with UNICEF, UN Women and UNFPA,for specific technical value-add and **increase targets for advancing localisation.**

***Recommendation 4: Review and update DFAT’s humanitarian commitments, processes and tools for clarity and coherence and more consistent prioritisation of protection in practice***

***Suggested options for implementation:***

1. **Update DFAT’s Protection Framework to align with normative standards and Australia’s recent commitments** in humanitarian action.[[53]](#footnote-54)
2. **Update DFAT’s Humanitarian Strategy and guidance notes**.[[54]](#footnote-55) The need for a broader protection risk analysis and response strategy could be made explicit. Revisions could support reporting on progress towards meeting protection commitments.[[55]](#footnote-56)
3. **Actively use DFAT’s investment in dedicated child protection programs** in humanitarian responses and in development programs[[56]](#footnote-57) to strengthen the child protection systems in the environments in which DFAT’s humanitarian work is undertaken.
4. **Revise DFAT SOPs** to better support prioritisation of protection in DFAT’s initial funding packages, including through the commission of protection analysis and the development of a protection strategy. [[57]](#footnote-58)
5. **Undertake real-time monitoring of DFAT implementing partners** and revise DFAT/MFAT MEF tools and guidance to reflect the centrality of protection.
6. **Revise the protection sub-criteria** in the HAQC template and in the Ratings Matrix to better reflect current protection norms. Consider the inclusion of specific questions for the Pacific in the Ratings Matrix.[[58]](#footnote-59)

***Recommendation 5: Expand investments in protection activities to support greater preparedness and resilience, and consider opportunities for a more strategic approach through regional and bilateral assistance***

***Suggested options for implementation:***

1. **Expand Australia’s preparedness investments** in protection through:

* **Expanding hazard risk mapping** to include protection risk analysis and require all investments to explicitly consider protection risks and mitigation measures.[[59]](#footnote-60)
* **Investing in community-based approaches** to protection, and expand **locally sourced dignity kits** to target older people and people with disabilities;

1. **Consider regional and/or country level strategies for protection** that connect preparedness, response, development and resilience investments and map response capacities at national and regional levels.[[60]](#footnote-61)
2. **Consider instituting a target for increased dedicated protection funding** in preparedness and response and use this to track protection investments in future responses[[61]](#footnote-62).

***Recommendation 6: Commit to donor leadership on advancing protection in humanitarian action*** *and* ***in the Pacific in particular***recognising Australia’s investments to date, potential for new humanitarian reform priorities post WHS-GB and the opportunity for donor leadership in this area.

# 9. Annexes

### Annex I – Summary of the Protection in Humanitarian Action Framework

|  |  |
| --- | --- |
| **GOAL OF AUSTRALIA’S AID PROGRAM** | |
| The fundamental purpose of Australia’s aid program is to help people overcome poverty. This also serves our national interest by promoting stability and prosperity both in Australia’s region and beyond. [DFAT] focuses our effort in areas where Australia can make a difference and where our resources can most effectively and efficiently be deployed. | |
| **HUMANITARIAN ACTION POLICY GOAL** | |
| To save lives, alleviate suffering and enhance human dignity during and in the aftermath of conflict, natural disasters and other humanitarian crises, as well as to strengthen preparedness for the occurrence of such situations. | |
| **PROTECTION IN HUMANITARIAN ACTION FRAMEWORK—CORE OUTCOME** | |
| To improve the safety of people affected by natural and human-induced crises. | |
| **KEY STRATEGIES** | |
| 1. Australia supports protection in preparedness for, response to and recovery from humanitarian crises by funding and advocating for:  a. protection to be mainstreamed into humanitarian action  b. dedicated protection programs as part of humanitarian action. | 2. Australia supports and advocates for improved global capacity for protection. [DFAT]’s priority areas are:  a. being accountable to affected populations  b. protecting people with disability  c. preventing and responding to gender based violence. |
| **ENABLING OUTCOMES** | |
| 1. [DFAT] and our partners have increased capacity to deliver protection in humanitarian action. | 2. [DFAT]’s protection in humanitarian action is accountable. |
| **GUIDING PRINCIPLES** | |
| 1. Respect and promote humanity, impartiality, neutrality and independence in humanitarian action.  2. Support the primary responsibility of states for affected populations within their borders in times of crisis, and help develop partner states’ capacity to do this.  3. Promote respect for international humanitarian law, refugee law and human rights law in the provision of humanitarian action and the protection of populations affected by humanitarian crises.  4. Practice Good Humanitarian Donorship, including by providing predictable and flexible humanitarian funding. | |

### **Annex II – Terms of Reference**

**INTRODUCTION**

The purpose of this Terms of Reference (ToR) is to outline the proposed approach to an evaluation of the implementation of Australia’s *Protection in Humanitarian Action Framework* in disaster responses by the Department of Foreign Affairs and Trade (DFAT).

The Evaluation will commence in September 2018 and be completed by December 2018. The timing is aligned with DFAT’s 2018 Aid Evaluation Plan.

**Reasons for the evaluation**

The evaluation has been commissioned by DFAT as one of two humanitarian program prioritised evaluations in 2018. The Humanitarian, NGOs and Partnership Division (HPD) aims to understand how well DFAT and its partners are delivering against the protection priorities and commitments set out in the 2013 *Protection in Humanitarian Action Framework* (the Framework) and 2016 *Humanitarian Strategy* (the Strategy).This includes consideration of whether performance and quality meets the expectations of the Australian Government and the international community, in line with commitments to accountability and continuous improvement. It is anticipated that lessons learned from this evaluation can shape future programming.

The Evaluation will examine the integration of protection investments before and during disaster responses in the Pacific, analysing how effectively these DFAT programs and partnerships support the protection of the most vulnerable.

**Purpose**

The purpose of the Evaluation is to:

1. Assess to what extent Australia's investments in protection in humanitarian action in the Pacific – through dedicated programming and mainstreamed approaches – have been timely, effective and appropriate.
2. Compile lessons and recommendations that can inform DFAT's future investments in – and management of –disaster preparedness and response.
3. Compile lessons and recommendations to inform DFAT's future policy advocacy for protection in humanitarian action.

The purpose combines recommending how implementation can be improved (the formative aspect) and assessing what DFAT and its partners have been able to achieve on the ground (the summative aspect). The purpose also serves accountability and learning aims, that is, independently evaluating performance and results with reference to the Framework and the Strategy, while identifying and articulating for future programming and advocacy how and why certain results were achieved or not in the contexts of the case studies.

**Subject of the evaluation**

Protection in disaster preparedness and response within the Australian aid program.

The key questions for the Evaluation are derived from the Framework, which includes the commitment “to prioritise the safety and dignity of affected populations in line with internationally accepted standards”[[62]](#footnote-63), and the Strategy, which confirms respect for humanitarian principles, international human rights, humanitarian and refugee law, people centred assistance, gender equality and social inclusion, do no harm, good humanitarian donorship and accountability.

What is ‘Protection’?

The IASC definition of protection endorsed in the Framework is:

*All activities, aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (i.e. human rights, humanitarian and refugee law). Human rights and humanitarian actors shall conduct these activities impartially and not on the basis of race, national or ethnic origin, language or gender.*[[63]](#footnote-64)

The Strategy further states:

*Protection aims to assure the safety of people from serious harm. This includes protection from violence, such as killing, wounding, torture, cruel and inhumane treatment, protection from exploitation and coercion, and protection from deliberate deprivation, such as denial to medical care, food, shelter or water. Protecting the rights and dignity of people affected by a crisis is an essential component of Australia’s humanitarian action and advocacy, as contained in DFAT’s Protection in Humanitarian Action Framework.[[64]](#footnote-65)*

**Protection is not a program in its own right (although there are dedicated investments) and there is no stand-alone design document and performance assessment framework.** But there are commitments to an outcome supported by a Framework detailing strategies and principles, as well as a Humanitarian Strategy Guidance Note on Protection. Firstly, investments in protection in humanitarian action are expected to fulfil the protection commitments listed in the Strategy (‘What we will do’). Secondly, the earlier Framework, to which the Strategy refers, presents the core outcome (‘To improve the safety of people affected by natural and human-induced crises’) and sets out supporting strategies, guiding principles and enabling outcomes.

The key strategies presented in the Protection Framework are:

1. Australia supports protection in preparedness for, response to and recovery from humanitarian crises by funding and advocating for:

a. protection to be mainstreamed into humanitarian action

b. dedicated protection programs as part of humanitarian action.

1. Australia supports and advocates for improved global capacity for protection. Priority areas are:

a. being accountable to affected populations

b. preventing and responding to gender-based violence

c. protecting people with disability.

**The Strategic Objectives and Key Results in the *Humanitarian Strategy* are relevant and complementary** including *Objective 1, Key Result 2: Assistance is principled, accountable and protects the most vulnerable in humanitarian crises*.

**Intended Users and other Stakeholders**

The primary users of the Evaluation are DFAT senior executive, desk officers, senior managers and investment managers in Canberra and at overseas missions.

Secondary users may include the Australian Defence Force, and the New Zealand Ministry of Foreign Affairs and Trade and the French Government (FRANZ partners).

Tertiary users and stakeholders may include recipient country governments, delivery partners (UN, NGOs, the Red Cross Movement), NGOs and CBOs representing affected communities and the general public.

The report (excluding any sensitive protection related information) will be published on the DFAT website in accordance with the Transparency Charter and DFAT’s Evaluation Policy.

**EVALUATION SCOPE**

The purpose of the evaluation is to assess the timeliness, effectiveness and appropriateness of Australia’s investment in protection efforts before and during disaster response in the Pacific, and present lessons and recommendations to enable DFAT to take stock and improve its performance in relation to protection priorities and commitments in the Framework and Strategy. The enquiry will be driven by five key evaluation questions and their relative prioritisation (see [Key evaluation questions](#_Key_evaluation_questions) below).

**What is in scope and not in scope?**

*Time period*

The scope includes the financial years 2013-14 to 2017-18. However, the emphasis is current capacity and performance (where we are now), drawing on the most recent information available about relevant investments.

*Region*

The geographic scope is the Pacific, including Papua New Guinea.

*Investments*

The evaluation examines DFAT’s disaster preparedness and response investments in the Pacific, including dedicated protection programming and mainstreamed approaches, with no distinction between investments managed by HPD and country and regional programs. Financial investments by other government departments will not be considered as part of this DFAT evaluation.

The evaluation will only consider investments valued above $3 million and for which at least one Aid Quality Check (AQC) has been undertaken by DFAT. The evaluation’s focus will therefore be on protection issues in the context of specific disaster responses in the Pacific. The approach ensures a similar evidence base is taken as a starting point to assess progress.

*Protection priorities*

The evaluation will focus on the overarching objective and the priority areas specified in the Protection Framework (accountability to affected populations, disability inclusion and preventing and responding to gender-based violence). Similarly, the evaluation will focus on the protection thematic priority in the Humanitarian Strategy, except to the extent that other thematic priorities overlap with or are directly relevant to protection in humanitarian action and international standards.

*Partnerships and funding approach*

Partner Performance and/or Multilateral Performance Assessments completed within the last two years will be considered where earmarked funding was provided for global humanitarian partners to respond to specific crises for which DFAT completed at least one (Humanitarian) AQC.

*Appropriateness of DFAT’s approach to protection, and implementation in practice*

While it will be necessary to make observations on the Protection Framework and the Humanitarian Strategy, the focus of the evaluation is implementation of the Framework i.e. actual practice. There are many issues involved in this aspect of the scope, including gender, international humanitarian law, do no harm/conflict sensitivity, human rights, refugee and child protection issues (in so far as they relate to protection in humanitarian action).

*DFAT’s management capacity*

While there will be broad observations on DFAT’s capacity to implement, this aspect will be limited mainly to a survey of DFAT personnel in Canberra and overseas.

**Key evaluation questions**

The evaluation will seek to answer the following questions in relation to DFAT’s investments in disaster response and preparedness in the Pacific:

1. Clarity and coherence: *Are Australia’s commitments and approach to Protection in Humanitarian Action (PHA) clear and coherent?*
2. Advocacy and engagement: *How appropriately and effectively does DFAT undertake PHA related advocacy and engagement?*
3. Partnerships and regional capacity development: *How appropriately and effectively does DFAT invest in partnership framework development and regional protection capacity?*
4. Investment design, appraisal and implementation: *How appropriately and effectively does DFAT and its partners prioritise people’s safety, dignity and rights in different contexts?*
5. Learning and accountability: *How robust are DFAT’s PHA related monitoring, evaluation, learning and accountability processes?*

The questions are listed in the order they will be considered, not their importance. The greatest emphasis in the enquiry and in developing findings will be placed on question 4, which is the key question for evaluating the timeliness, effectiveness and appropriateness of Australia’s investments in PHA (evaluation purpose 1).

The evaluation purpose distinguishes between dedicated programming and mainstreamed approaches. This distinction will be reflected in the sub-questions for question 4. The core tasks for question 4 will be validation/critical review of relevant (H)AQCs by document research, key informant interviews and case studies.

Advocacy (raised as a priority by evaluation purpose 3) will be considered in question 4 (in relation to specific investments) and separately in question 2 (taking a broader view).

While they are important, other questions will necessarily be addressed more summarily given the duration of the evaluation. Nevertheless, some treatment is indispensable because they will inform future investments in – and the planning and management of – humanitarian responses and disaster preparedness (see evaluation purpose 2).

The evaluation questions will be broken down into sub-questions with specific information requirements and methods in the Evaluation Plan. Gender equality and disability inclusion and accountability to affected populations will be explicitly investigated and integrated in sub-questions, where relevant to protection in humanitarian action.

**Evaluation criteria**

As noted earlier, Australia’s investments in protection before and during disaster responses will be evaluated against the Humanitarian Strategy and the Protection in Humanitarian Action Framework. While these do not include a formal performance assessment framework and criteria, the commitments, strategies and principles are presented clearly and international standards are referred to. The evaluation team will compile a rubric of the most up to date international standards for both dedicated programs and mainstreaming.

**EVALUATION APPROACH**

The Evaluation Team is gender-balanced, comprising of a Team Leader (Evaluation Specialist with in depth expertise in Humanitarian assistance) and Senior Protection Specialist bringing necessary technical expertise in protection and gender in humanitarian action. The Team will work closely with staff of the HPD. The Evaluation will be managed by Humanitarian Partnerships Section, Humanitarian and Refugee Policy Branch, HPD.

Mixed methods and means (quantitative, qualitative etc.) and multiple sources will be employed so far as possible to ensure triangulation of information. Specifically, the evaluation will use a combination of wider landscape research and enquiry, gender‑representative interviews of key stakeholders and informants (interviewee target 50%, informant target 50%), a short survey of relevant DFAT personnel at Post and in Canberra (responder characteristics will be disaggregated by gender), and case studies with field visits to facilitate enquiring into issues in certain contexts in more detail.

**Research and enquiry**

It is understood that the Protection Specialist lead will examine existing policies, guidelines, planning documents, information resources and training (designed for staff in Canberra and at Post) to judge whether they are adequate to guide robust investments in protection (dedicated and mainstreamed) in disaster preparedness and response in the Pacific, with reference to international imperatives, trends and developments, as well as review relevant literature and other analysis by leaders in the field.

Concurrently, the Team Leader will focus on regional and country aid investment documentation and, with the protection specialist, identify and analyse protection efforts within disaster preparedness and response strategies, investments and trends before moving on to assess existing performance and quality (P&Q) material (drawing on finalised and draft reports where available) including Annual Program Performance Reports (APPRs), HAQCs, relevant (F)AQCs, and relevant Multilateral Performance Assessments (MPA),Partner Performance Assessments (PPA) and Evaluations (of DFAT’s responses to TC Pam and to TC Winston in the education sector).

A significant focus of the team will be validating HAQC protection criterion ratings.

**Interviews and short survey**

The primary interviews (other than those conducted in the field) will be those conducted with DFAT and other stakeholders in the Australian Government, funded partner organisations/agencies and their implementing partners, and related protection specialists/key informants. These interviews will generally be by phone, with DFAT able to provide teleconferencing support, if required.

The short survey will be based on the evaluation questions and will be directed at relevant personnel in Canberra and at Post.

**Case study field visits**

Two or three case studies with field visits will provide depth and greater understanding by providing the opportunity to interview final delivery partners, including NGOs and CBOs, and representatives of affected communities if not members of communities themselves. The field visits and investments to be included will be determined in consultation with Posts and the evaluation team.

**Reference Group**

DFAT has established an internal reference group who will provide advice and feedback on the shape of evaluation, its reporting and its recommendations. The group is made up of humanitarian, regional and thematic specialists from across DFAT, in Canberra and at Post.

**Detailed methodology**

The detailed methodology will be presented in full by the Team in the Evaluation Plan and implemented in Phase 2 (with any adaptations as required and approved). The methodology to be presented in the Evaluation Plan will *inter alia*:

* Include the data collection methods for each evaluation question
* Specify the extent to which gender, age and disability disaggregated data, including the perspectives of women, girls, men and boys from diverse stakeholder groups, are likely to be available
* Identify ethical issues and how they will be addressed including the management of any sensitive protection information
* Outline methodological limitations

**CONSULTING SERVICES, DELIVERABLES AND SCHEDULING**

**Services required**

The Contractor will produce an Evaluation Report that addresses the evaluation's objectives as described above and present the evaluation findings to DFAT’s management and staff in Canberra.

In conducting the evaluation, the contractor will undertake:

* 1. a desk review of existing material on the performance and quality of relevant disaster preparedness and response investments in the Pacific, with a focus on protection issues
  2. a desk review of DFAT's policies, guidelines, planning documents, information and training designed to guide robust investments in protection
  3. interviews with relevant stakeholders in DFAT, partner governments, delivery organisations and representatives of affected communities
  4. fieldwork, with a focus on interviews with members of affected communities, representing a variety of ages, genders and abilities.

If fieldwork interviews include group/community situations, the contractor will ensure arrangements are made to speak with women and potentially marginalised/vulnerable people separately to ensure they have a voice.

**Reporting requirements**

The Contractor must provide the following reports within the indicated timeframes:

1. Terms of Reference, jointly agreed by Contractor and DFAT by 14 September 2018 or earlier in line with DFAT's *Monitoring and Evaluation Standards* (2016)*.*
2. Evaluation Plan, jointly agreed by Contractor and DFAT by 18 September 2018 or earlier in line with DFAT's *Monitoring and Evaluation Standards* (2016)*.*
3. An Aide Memoire prepared at the end of each field trip (2-3 pages), with all field visits to be completed by 19 October 2018. The Aide Memoire will present the anticipated key findings and recommendations arising from the field trip.
4. A near-final draft of the Evaluation Report by 23 November 2018 in line with DFAT's Monitoring and Evaluation Standards (2016) for DFAT peer review. The Evaluation Report structure and length (maximum 25 pages) will be determined in the Evaluation Plan, but will include the following:
   1. Introduction
   2. Evaluation case studies for specific disaster preparedness and response investments
   3. Overarching assessment of DFAT's relevant policies, guidelines, planning documents, information and training
   4. Recommendations for management.
5. A final Evaluation Report by 12 December 2018, suitable for publication on DFAT’s website. Before publication, the final draft will be subject to DFAT peer review, revision by the Contractor, and then agreement by DFAT SES.

**Specification of the team and responsibilities**

The team will comprise an Evaluation Specialist (Team Leader) and a Senior Protection Specialist:

The Team Leader will:

* Assist DFAT to conceptualise the evaluation and its scope
* Develop the Evaluation Plan in consultation with DFAT
* Request and integrate technical advice and inputs from the Protection Specialist on tasks in the Evaluation Plan including sharing research, interview and report writing responsibilities and reasonable load sharing
* Represent the evaluation team, and lead consultations with partners, stakeholders, government officials and other donor agencies
* Establish a system for collating and analysing data collected during the evaluation
* Lead on the development of each deliverable including exit debriefs for country visits (Aide Memoires) and draft and final report
* Ensure the quality and coherence of evaluation outputs
* Finalise the evaluation report in close consultation with the DFAT Evaluation Manager
* Ensure that the evaluation meets the requirements of the Terms of Reference and contractual obligations and that the evaluation process and report align with DFAT’s M&E Standards.

The Senior Protection Specialist lead will:

* Lead on protection and gender analysis, coherence and situating findings within
* Lead analysis of the current international and regional context of Australian investments in protection in humanitarian action (setting the scene for the evaluation)
* Lead the protection related technical aspects of the Evaluation Plan including in particular the research methods
* In the absence of the Team Leader represent the review team and lead consultations with partners, stakeholders, government officials and other donor agencies
* Lead the protection related aspects of drafting, inputs and comments on exit debriefs for country visits (Aide Memoires) and draft and final report
* Produce inputs for and provide technical comments on the Evaluation Plan, exit debriefs and the draft and final evaluation report.

Both specialists will be responsible for ensuring gender and disability inclusiveness is integrated in methodology, evaluation questions, interviews, field missions, analysis and documentation.

During field visits DFAT Posts will be expected to assist with local context and background. At the discretion of the Team they may contribute to assessments and analysis but it would generally not be appropriate for them to participate in interviews.

**Proposed scheduling**

An indicative schedule is attached, based on the foregoing. A more detailed schedule will be presented with the Evaluation Plan, which will also address security considerations.

*Last revised 18 September 2018*

**Annex: International and regional context**

**Discourse, policy and practice on the prioritisation of protection in humanitarian action continues to evolve**. The cluster approach, transformative agenda and more recent World Humanitarian Summit and Grand Bargain have escalated the discourse on prioritising protection. 2013 remains a pivotal year - the IASC Task Team on Protection Priority was established and in December 2013 the IASC Principals issued a statement on the centrality of protection to all humanitarian action, committed to commissioning the Whole of System Review and the development of the first IASC Policy on Protection.

Despite these significant global developments, **protection results remain uneven and elusive due to a range of factors** including geopolitical agendas and lack of political solutions, the conduct of hostilities, shrinking space for civil society and human rights, as well as the necessary pre-crisis capacity and resources to respond to what often amount to development deficits. This is further exacerbated by monitoring and evaluation challenges, leadership capacity and prioritisation, and the necessary human and financial resourcing to adequately operationalise. The GPC recently issued a report on the centrality of protection which highlighted significant deficits across several crises.

**The global developments that have occurred since the drafting of DFAT’s Protection in Humanitarian Action Framework in 2013 are significant**. The Grand Bargain commitments Australia and other donors made to localization, including the percentage of funding to local and national responders, impacts on protection related programming, as does Australia’s endorsement of the Core Humanitarian Standard (CHS), which places communities and people affected by crisis at the centre of humanitarian action. There is now also a greater focus on coherence which is relevant to Australian investments, including those made through other government departments such as Defence[[65]](#footnote-66).

The Agenda for Humanity five-point plan 2016[[66]](#footnote-67) outlines the changes needed to ensure that “people’s safety, dignity and the right to thrive – is placed at the centre of global decision-making”. There is also renewed global discourse on the humanitarian-development-peace nexus in the context of ongoing reform of the UN development system by the UN Secretary General which will impact on the humanitarian system including country level humanitarian leadership, analysis, planning and financing. The Global Compacts on Refugees and Migrants, and Comprehensive Refugee Response Framework initiated in 2016 are also relevant.

### **Annex III – Literature Review**

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### **Annex IV – Interviews**

**Total: 86\***

**Female: 62 Male: 24**

Includes two facilitated group discussions/ interviews (AHP Disaster Ready partners in Suva and DFAT’s Suva Post).

1. **In Australia**

| **Organisation** | **Job title** | **Gender** |
| --- | --- | --- |
| ActionAid Australia | Executive Director; Program Manager, Women’s Rights and Emergencies | Female (2) |
| ACT for Peace | Senior Policy and Protection Adviser; International Program Coordinator; Disasters and Emergencies Program Coordinator | Female (2) Male (2) |
| Australian Council for International Development | Humanitarian Policy and Advocacy | Female (1) |
| Australian Red Cross | Protection, Gender and Inclusion Adviser | Male (1) |
| CARE Australia | Program Manager; Coordinator, Emergency Response Unit | Female (1) Male (1) |
| Caritas Australia | Manager CAN DO Coordination Unit; Evaluation and Learning Coordinator CAN DO; Humanitarian Program Coordinator; Design Monitoring Accountability | Female (3) Male (1) |
| CBM Australia | Disability Inclusion Advisors | Female (3) |
| Humanitarian Advisory Group | Director | Female (1) |
| Oxfam Australia | Humanitarian Manager; Humanitarian Advocacy Coordinator | Female (2) |
| RedR / Australia Assists | Director, International Programs | Female (1) |
| Save the Children Australia | Policy & Advocacy; Humanitarian Advisor | Female (1) Male (1) |
| World Vision Australia | Senior Policy Advisor, Conflict and Displacement | Female (1) |
| Department of Foreign Affairs and Trade (DFAT)\* | First Assistant Secretary, Humanitarian, NGOs & Partnerships Division (HPD) | Male (1) |
| Assistant Secretary, HPD; A/g Assistant Secretary, HPD | Female (1) Male (1) |
| Director, Humanitarian Reform and Performance Section, Humanitarian & Refugee Policy Branch (HUB), HPD | Male (1) |
| Assistant Director, Humanitarian Reform and Performance Section, HUB | Male (1) |
| Performance and Quality Officer, Humanitarian Reform and Performance Section, HUB | Female (1) |
| Humanitarian Performance and Quality Manager, Humanitarian Reform and Performance Section, HUB | Female (1) |
| Humanitarian Reform and Performance Section, HUB | Female (1) |
| Director, Humanitarian Partnerships Section, HUB | Female (1) |
| Assistant Director, Humanitarian Partnerships Section, HUB | Female (1) |
| Humanitarian Protection, Humanitarian Partnerships Section, HUB | Female (1) |
| Director, Emergency Response Section, Humanitarian Response, Risk and Recovery Branch (HMB), HPD | Male (1) |
| Senior Humanitarian Officer, HPD | Female (1) |
| Senior Humanitarian Officer, HPD | Female (1) |
| Humanitarian Adviser (DFID secondee), HPD | Female (1) |
| Australian Volunteer Program, NGOs and Volunteers Branch (NVB), HPD | Female (1) |
| Gender Equality Branch (GEB) | Female (1) |
| Pacific desk (Vanuatu), Pacific Division (PAD) | Female (1) |
| PNG desk (Health), PAD | Female (1) |
| Child Protection (Compliance), Management and Fraud Control Branch (FRB) | Female (2) |
| Director Performance and Quality Analysis, Office for Development Effectiveness (ODE) | Male (1) |

1. **In Fiji**

| Organisation | Job title |  |
| --- | --- | --- |
| Edge Effect | Director | Female (1) |
| Medical Service Pacific (MSP) | Executive Director; Counsellor | Female (2) |
| Pacific Disability Forum | Manager Preparedness Emergency Response Unit; Regional Coordinator AHP | Male (2) |
| Fiji Red Cross Society | Director General | Male (1) |
| International Planned Parenthood Federation (IPPF) | Humanitarian Deputy Director Pacific; Executive Director; Reproductive & Family Health Assistant; Program Advisor Pacific Humanitarian Program; SRH Advisor Pacific Humanitarian Program | Female (4) |
| Fiji Women’s Crisis Centre | Director-Coordinator | Female (1) |
| Ramakrishna Mission | Manager | Male (1) |
| Plan International Australia\* | Humanitarian Adviser | Male (1) |
| Fiji Disabled People’s Federation\* | Representative and member | Female (2) |
| Habitat for Humanity\* | AHP Focal Point Suva | Male (1) |
| Save the Children\* | AHP Focal Point Suva | Female (1) |
| ADRA\* | AHP Focal Point Suva | Female (1) Male (1) |
| CARE International\* | AHP Focal Point and Gender Adviser Suva | Female (1) |
| Live and Learn\* | AHP Focal Point Suva | Female (1) |
| Empower Pacific | Mental Health Specialist; EAP Manager & Senior Social Worker; Lautoka Team Leader & Senior Counsellor; Monitoring & Evaluation Officer & Technical Adviser | Female (4) |
| UN Women | Gender and Protection Specialist; Programme Specialist – Gender Equality, Women’s Rights and Governance | Female (2) |
| UNFPA | Deputy Director and Deputy Representative; Technical Adviser | Female (2) |
| UNICEF | Deputy Representative; Emergency Specialist | Female (1) Male (1) |
| UN OCHA | Information Management Officer | Male (1) |
| WHO | Representative | Female (1) |
| FAO | Food Security & Livelihoods Cluster (Australia Assists Deployee) | Female (1) |
| Australian High Commission, Fiji\* | Senior Program Manager, Gender Equality & Inclusive Growth-Bilateral; First Secretary, Gender Equality; Social Protection Focal Point; First Secretary – Climate Change and Disaster Management; Program Manager – Resilience & Climate Change; Program Manager- Civil Society Engagement | Female (3) Male (3) |

### **Annex V – Survey Responses (Rating Only)**

#### Part A: Clarity and coherence of commitments and approach

Table 1. Survey Question: *Are Australia’s commitments and approach to protection in humanitarian action (PHA) clear and coherent?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT survey responses (n = 8; don’t know = 1)* | | | | | |
| Unsatisfactory (as a %) | | **12.5%** | Satisfactory (as a %) | | **87.5%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 4 |
| 2 | Poor quality | 0 | 5 | Good quality | 3 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 0 |
| *Partner survey responses (n = 14; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **0%** | Satisfactory (as a %) | | **100%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 9 |
| 2 | Poor quality | 0 | 5 | Good quality | 5 |
| 3 | Less than adequate quality | 0 | 6 | Very high quality | 0 |

Table 2. Survey question: *To what extent is DFAT’s approach to PHA* ***consistent with international standards and good practice****?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT survey responses (n = 9)* | | | | | |
| Unsatisfactory (as a %) | | **0%** | Satisfactory (as a %) | | **100%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 3 |
| 2 | Poor quality | 0 | 5 | Good quality | 6 |
| 3 | Less than adequate quality | 0 | 6 | Very high quality | 0 |
| *Partner survey responses (n = 13; don’t know 4)* | | | | | |
| Unsatisfactory (as a %) | | **7.7%** | Satisfactory (as a %) | | **92.3%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 0 | 5 | Good quality | 6 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 1 |

Table 3: Survey question: *Are DFAT’s* ***expectations for mainstreaming*** *protection clear (including accountability to affected populations)?*

| *DFAT survey responses (n = 8; don’t know 1)* | | | | | |
| --- | --- | --- | --- | --- | --- |
| Unsatisfactory (as a %) | | **25%** | Satisfactory (as a %) | | **75%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 2 |
| 2 | Poor quality | 0 | 5 | Good quality | 4 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |
| *Partner survey responses (n = 15; don’t know 2)* | | | | | |
| Unsatisfactory (as a %) | | **13.3%** | Satisfactory (as a %) | | **86.7%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 1 | 5 | Good quality | 7 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 1 |

Table 4: Survey question: *To what extent do you think DFAT’s policy and approach to PHA adequately articulates and supports the* ***link between humanitarian and development programming****?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT survey responses (n = 7; don’t know 2)* | | | | | |
| Unsatisfactory (as a %) | | **57.1%** | Satisfactory (as a %) | | **42.9%** |
| 1 | Very poor quality | 1 | 4 | Adequate quality | 1 |
| 2 | Poor quality | 1 | 5 | Good quality | 2 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |
| *Partner survey responses (n = 14; don’t know 3)* | | | | | |
| Unsatisfactory (as a %) | | **35.7%** | Satisfactory (as a %) | | **64.3%** |
| 1 | Very poor quality | 1 | 4 | Adequate quality | 3 |
| 2 | Poor quality | 0 | 5 | Good quality | 6 |
| 3 | Less than adequate quality | 4 | 6 | Very high quality | 0 |

Table 5. Survey question (DFAT only): *How would you rate* ***DFAT’s investment in its internal capacity*** *to program and deliver PHA, including guidance, training, capacity development and timely access to quality in house technical advice?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT survey responses (n = 8; don’t know 1)* | | | | | |
| Unsatisfactory (as a %) | | **75%** | Satisfactory (as a %) | | **25%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 2 |
| 2 | Poor quality | 1 | 5 | Good quality | 0 |
| 3 | Less than adequate quality | 5 | 6 | Very high quality | 0 |

#### Part B: Prioritisation in practice

Table 6. Survey question: ***How appropriately and effectively does DFAT and its partners prioritise people’s safety, dignity and rights in different contexts?***

| *DFAT responses (n =7; don’t know = 1)* | | | | | |
| --- | --- | --- | --- | --- | --- |
| Unsatisfactory (as a %) | | **28.6%** | Satisfactory (as a %) | | **71.4%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 4 |
| 2 | Poor quality | 0 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |
| *Partner responses (n = 13; don’t know = 4)* | | | | | |
| Unsatisfactory (as a %) | | **0%** | Satisfactory (as a %) | | **100%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 0 | 5 | Good quality | 8 |
| 3 | Less than adequate quality | 0 | 6 | Very high quality | 0 |

Table 7. Survey question (DFAT): *In your experience, to what extent is DFAT meeting its Protection Framework commitment to support and advocate for* ***accountability to affected populations****?* (Partners): *To what extent do you think DFAT in partnership with your organisation is meeting its commitment to support and advocate for accountability to affected populations in humanitarian action?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 6; don’t know = 2)* | | | | | |
| Unsatisfactory (as a %) | | **50%** | Satisfactory (as a %) | | **50%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 3 |
| 2 | Poor quality | 1 | 5 | Good quality | 0 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |
| *Partner responses (n = 13; don’t know = 4)* | | | | | |
| Unsatisfactory (as a %) | | **30.8%** | Satisfactory (as a %) | | **69.2%** |
| 1 | Very poor quality | 1 | 4 | Adequate quality | 6 |
| 2 | Poor quality | 0 | 5 | Good quality | 3 |
| 3 | Less than adequate quality | 3 | 6 | Very high quality | 0 |

Table 8. Survey question (DFAT): *In your experience, to what extent is DFAT meeting its Protection Framework commitment to support and advocate for prevention and response to* ***sexual and gender-based violence****?* (Partners): *To what extent DFAT in partnership with your organisation is meeting its commitment to support and advocate for prevention and response to sexual and gender-based violence in humanitarian action?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 8)* | | | | | |
| Unsatisfactory (as a %) | | **12.5%** | Satisfactory (as a %) | | **87.5%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 0 | 5 | Good quality | 2 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 0 |
| *Partner responses (n = 14; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **21.4%** | Satisfactory (as a %) | | **78.6%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 1 | 5 | Good quality | 6 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |

Table 9. Survey question (DFAT): *In your experience, to what extent is DFAT meeting its Protection Framework commitment to support and advocate for* ***disability inclusion****?* (Partners): *To what extent DFAT in partnership with your organisation is meeting its commitment to support and advocate for disability inclusion in humanitarian action?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 8)* | | | | | |
| Unsatisfactory (as a %) | | **12.5%** | Satisfactory (as a %) | | **87.5%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 4 |
| 2 | Poor quality | 0 | 5 | Good quality | 3 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 0 |
| *Partner responses (n = 14; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **0%** | Satisfactory (as a %) | | **100%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 0 | 5 | Good quality | 8 |
| 3 | Less than adequate quality | 0 | 6 | Very high quality | 1 |

Table 10. Survey question (DFAT): *In recent responses to what extent do you think DFAT has applied current good practice to safely and confidentially prevent and respond to allegations of* ***sexual exploitation and abuse*** *against members of affected populations (women, girls, boys and men) by staff, partners or contractors?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 5; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **60%** | Satisfactory (as a %) | | **40%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 1 |
| 2 | Poor quality | 1 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |

#### Part C: Advocacy and engagement

Table 11. Survey question: *How appropriately and effectively does DFAT undertake PHA related advocacy and engagement?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 9)* | | | | | |
| Unsatisfactory (as a %) | | **44.4%** | Satisfactory (as a %) | | **55.6%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 2 |
| 2 | Poor quality | 0 | 5 | Good quality | 3 |
| 3 | Less than adequate quality | 4 | 6 | Very high quality | 0 |
| *Partner responses (n = 14; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **21.4%** | Satisfactory (as a %) | | **78.6%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 8 |
| 2 | Poor quality | 2 | 5 | Good quality | 3 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 0 |

#### Part D: Partnerships and regional capacity development

Table 12. Survey question: *How appropriately and effectively does DFAT invest in partnership framework development and regional protection capacity*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 5; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **40%** | Satisfactory (as a %) | | **60%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 2 |
| 2 | Poor quality | 0 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |
| *Partner responses (n = 13; don’t know = 4)* | | | | | |
| Unsatisfactory (as a %) | | **30.8%** | Satisfactory (as a %) | | **69.2%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 7 |
| 2 | Poor quality | 1 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 3 | 6 | Very high quality | 1 |

Table 13. Survey question: *In your experience, to what extent does DFAT fund the* ***most appropriate partners and actions*** *in each response to meet its protection in humanitarian action commitments?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 7; don’t know =1)* | | | | | |
| Unsatisfactory (as a %) | | **28.6%** | Satisfactory (as a %) | | **71.4%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 4 |
| 2 | Poor quality | 1 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 1 | 6 | Very high quality | 0 |
| *Partner responses (n = 14; don’t know = 3)* | | | | | |
| Unsatisfactory (as a %) | | **28.6%** | Satisfactory (as a %) | | **71.4%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 6 |
| 2 | Poor quality | 1 | 5 | Good quality | 4 |
| 3 | Less than adequate quality | 3 | 6 | Very high quality | 0 |

Table 14. Survey question (DFAT only): *In your experience, what is the quality of evidence available to DFAT that* ***partners consider protection*** *as a high priority, allocate resources and mainstream it, reflecting DFAT’s commitments and ensuring assistance is impartial and avoids exacerbating risks and negative impacts?*

|  |  |  |
| --- | --- | --- |
| *DFAT responses (n = 8)* | | |
| Strong evidence 2 | Medium evidence 4 | Weak evidence 2 |

Table 15. Survey question (partners only): *Does DFAT provide* ***adequate and appropriate support to partners*** *in a humanitarian response to meet international expectations for protection programming and mainstreaming?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *Partner responses (n = 11; don’t know = 6)* | | | | | |
| Unsatisfactory (as a %) | | **54.5%** | Satisfactory (as a %) | | **45.5%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 4 |
| 2 | Poor quality | 1 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 5 | 6 | Very high quality | 0 |

Table N/A: Survey question: *What (else) do you think DFAT should do to i) strengthen key partnerships and ii) help partner governments and other national and local actors strengthen their capacity to protect during crises?*

#### Part E: Monitoring, evaluation, learning and accountability

Table 16.Survey question: *How robust are DFAT’s PHA related monitoring, evaluation, learning and accountability processes?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *(DFAT n = 8)* | | | | | |
| Unsatisfactory (as a %) | | **62.5%** | Satisfactory (as a %) | | **37.5%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 3 |
| 2 | Poor quality | 2 | 5 | Good quality | 0 |
| 3 | Less than adequate quality | 3 | 6 | Very high quality | 0 |
| *Partner responses (n = 11; don’t know = 6)* | | | | | |
| Unsatisfactory (as a %) | | **45.5%** | Satisfactory (as a %) | | **54.5%** |
| 1 | Very poor quality | 1 | 4 | Adequate quality | 5 |
| 2 | Poor quality | 0 | 5 | Good quality | 1 |
| 3 | Less than adequate quality | 4 | 6 | Very high quality | 0 |

Table N/A. Survey question (partners only): *What are* ***the main challenges*** *you face in monitoring and reporting on protection in humanitarian action and supporting results with sex, age and disability disaggregated data?*

Table 18. Survey question (DFAT only): *For those investments that you are familiar with, is the* ***evidence base for rating the protection criterion*** *in the Humanitarian Response AQC generally strong, moderate or weak?*

|  |  |  |
| --- | --- | --- |
| *DFAT responses (n = 6; don’t know 2)* | | |
| Strong evidence 0 | Moderate evidence 2 | Weak evidence 4 |

Table 19: Survey sub-question (DFAT only): *To what extent do DFAT’s performance quality systems and processes support* ***continuous improvement*** *in the quality of protection interventions in humanitarian action?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *DFAT responses (n = 7; don’t know = 1)* | | | | | |
| Unsatisfactory (as a %) | | **43%** | Satisfactory (as a %) | | **57%** |
| 1 | Very poor quality | 0 | 4 | Adequate quality | 4 |
| 2 | Poor quality | 1 | 5 | Good quality | 0 |
| 3 | Less than adequate quality | 2 | 6 | Very high quality | 0 |

Table 20: Survey question (partners only): *To what extent is DFAT* ***transparent and accountable*** *in relation to decisions about and investments in PHA?*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *Partner responses (n = 11; don’t know = 6)* | | | | | |
| Unsatisfactory (as a %) | | **54.5%** | Satisfactory (as a %) | | **45.5%** |
| 1 | Very poor quality | 2 | 4 | Adequate quality | 3 |
| 2 | Poor quality | 1 | 5 | Good quality | 2 |
| 3 | Less than adequate quality | 3 | 6 | Very high quality | 0 |

Notes on respondents:

DFAT (9 respondents) – All but one Canberra based; all but one female; the vast majority specified ‘humanitarian response’ as the main focus of their work (6) followed by ‘protection’ (3); majority specified their position as ‘manager’ (5) followed by ‘APS 1-6’ (3).

Partners (17 respondents) – Vast majority from AHP organisations (although a few did not disclose their organisation); most Australia based (12) but a substantial number Pacific based (5); similar number of female and male respondents (8 female; 7 male, 2 unidentified); majority specified humanitarian response as main focus (15); and most common position specified was ‘manager or coordinator’ (8).

### **Annex VI – Key Activities and Protection Risk Analysis**

**Key activities and processes** below highlight specific activities DFAT staff identified during the evaluation as needing access to dedicated expertise:

* internal capacity development
* updating internal systems, tools, processes
* engaging protection expertise from the beginning of crises
* advising leadership on strategic approach and priorities
* drafting (internal) protection strategy
* (inclusion in) Crisis Response Team (CRT)
* drafting protection country profiles and rapid protection risk analysis
* reviewing partner proposals.

Protection country profiles could be undertaken pre-crisis as part of preparedness and rapidly updated with the onset of a crisis event. In terms of human resources to meet these expertise gaps, options include shared services, UN partnerships and/ or DFAT HPD/ Post hosting a technical specialist.

**Broader protection risk analysis**

“In practice, **for a humanitarian response to be protection-oriented**, it is essential to **understand and seek to prevent, mitigate or end actual and potential risks**, including violations of international humanitarian and human rights law, producing the harm that affected persons experience during a conflict or **disaster**. This **requires a continuous analysis of risks people face, of threats, vulnerabilities and capacities of affected persons, and of the commitment and capacities of duty bearers to address risk factors**. It also requires the identification of measures to reduce those risks, avoid exacerbating risk, including to stop and prevent violations, avoid reinforcing existing patterns of violence, abuse, coercion or deprivation and restoring safety and dignity to people’s lives. This **analysis provides the evidence-base for programming, advocacy and dialogue** for the purpose of influencing and changing behaviours and policies in support of a more favourable protection environment. Protection demands meaningful engagement with affected persons during all phases of a response in a manner that recognizes and is sensitive to **age, gender and diversity**.” IASC Protection Policy 2016 (p2).

The continuous identification and analysis of protection risks, threats, vulnerabilities and capacities, including that of duty-bearers, must be informed by a broader age, gender and diversity approach to ensure no one is left behind:

* age (e.g. children, adolescents, older persons);
* gender (e.g. women, girls, men and boys); and
* diversity (e.g. PWD, LGBTI, religious and/ or ethnic minority groups);
* geographic considerations (e.g. urban vs rural and access to services).

Protection risk = threats x vulnerabilities/ capacities (noting not an equation but a tool to understand risk assessment)

Probing questions: who is most at risk, where and why?

|  |  |  |
| --- | --- | --- |
|  | **Definition** | **Practical examples** |
| Threat | Violence, coercion, deprivation, exploitation, abuse, discrimination or neglect at community, household or individual level | Displacement, SEA, increase in intimate partner violence, exclusion from assistance (for people with disabilities, members of the LGBTI community and ethnic/religious minority groups), trafficking networks, child labour and early marriage |
| Vulnerability | Affected by age, gender and diversity factors that can be intersectional  Also affected by life circumstances e.g. poverty and assets, and education | For example: adolescent females, people with disabilities, members of the LGBTI community, people from an ethnic minority, polygamous households, single older persons, separated and unaccompanied children |
| Capacities | Experiences, knowledge, network, financial (individual, household and community level) | Position in community, ability to access protection services and trust in authorities |

\*Adapted from normative guidance and ECHO Humanitarian Protection Thematic Policy 2016.

1. Double the global average in non-disaster times according to UN Women’s Global Database on Violence Against Women in the Pacific Humanitarian Cluster Support Team Fact Sheet January 2018 [↑](#footnote-ref-2)
2. UNESACPDD (2012), *Disability at a Glance 2012: Strengthening the evidence based in Asia and the Pacific.* Available at URL http://www.unescapsdd. org/files/documents/PUB\_Disability‐Glance‐2012.pdf [↑](#footnote-ref-3)
3. Notwithstanding limitations with data on this. This is a conservative estimate based on interview with specialist partner in the Pacific, Edge Effect. [↑](#footnote-ref-4)
4. The most critical gaps were: (i) Decision and justification including financial regulation requirement as appropriate; (ii) Periodic reports from partners and their final reports (or global report relied on) referenced in AQCs. [↑](#footnote-ref-5)
5. International Law Commission (ILC) (2018) on the work of its [sixty-third](http://legal.un.org/ilc/sessions/63/) session, 26 April to 3 June and 4 July to 12 August 2011, Available at <http://legal.un.org/ilc/guide/6_3.shtml>. Further normative guidance including the mandate, studies and reports also available at the link provided. [↑](#footnote-ref-6)
6. Accessed from: [http://ec.europa.eu/echo/sites/echo-site/files/policy\_guidelines\_humanitarian\_protection\_en.pdf p8](http://ec.europa.eu/echo/sites/echo-site/files/policy_guidelines_humanitarian_protection_en.pdf%20p8) [↑](#footnote-ref-7)
7. Recognising some perceived limitations for donors in relation neutrality but the significant opportunities that remains, particularly in relation to disaster response that is less controversial than armed conflict for example. [↑](#footnote-ref-8)
8. CERF (2010), *Life Saving Criteria*. Available at <https://www.unocha.org/cerf/sites/default/files/CERF/FINAL_Life-Saving_Criteria_26_Jan_2010__E.pdf> [↑](#footnote-ref-9)
9. Landry, J. and Murray, J (2013) *Placing protection at the centre of humanitarian action. Study on Protection Funding in Complex Humanitarian Emergencies: Issues for the Global Protection Cluster to Consider*. Available at <http://www.globalprotectioncluster.org/_assets/files/gpc_documents/Protection%20Funding%20Study%20-%20Issues%20for%20GPC%20to%20Consider_EN.pdf> [↑](#footnote-ref-10)
10. IASC and Norwegian Refugee Council (2015) *Independent Whole of System Review of Protection in the Context of Humanitarian Action,* pp 41-2. [↑](#footnote-ref-11)
11. International Law Commission (ILC) (2018), *Analytical Guide to the Work of the ILC. Protection of people in the event of disasters*. Available at: <http://legal.un.org/ilc/guide/6_3.shtml> [↑](#footnote-ref-12)
12. IASC and Norwegian Refugee Council (2015), *Independent Whole of System Review of Protection in the Context of Humanitarian Action,* pp 41-2 [↑](#footnote-ref-13)
13. UNOCHA (2016), *Agenda for Humanity, Annex to the Secretary-General Report for the World Humanitarian Summit*. 9 February 2016. Available at: <https://www.unocha.org/publication/agenda-humanity-annex-secretary-general-report-world-humanitarian-summit> [↑](#footnote-ref-14)
14. Global Protection Cluster (2017), *Centrality of Protection in Humanitarian Action GPC 2017 Review*. Available at <http://www.globalprotectioncluster.org/2018/07/04/new-publication-centrality-of-protection-in-humanitarian-action-gpc-2017-review/> [↑](#footnote-ref-15)
15. Fiji Safety and Protection Cluster (2017), *Protection Cluster Report TC Winston*, July 2017. [↑](#footnote-ref-16)
16. Buchan, E. (2017), ‘The WPS agenda must also be responsive to natural disasters’, *Australian Strategic Policy Institute (ASPI)*. [Online]. Available at <https://www.aspistrategist.org.au/wps-agenda-must-also-responsive-natural-disasters/>; and

    Miller, A. (2018), *UN Women* [Online]. Available at https://unwomen.org.au/our-work/projects/un-women-responding-to-natural-disasters/ [↑](#footnote-ref-17)
17. Noting that protecting people with disabilities has in practice between conflated with disability inclusion. This is not satisfactory recognising *protection* necessitates investments in dedicated services and prevention measures beyond inclusion of persons with disabilities in humanitarian assistance. [↑](#footnote-ref-18)
18. Some of the challenges with current approaches are outlined by Hugo Slim in ICRC Blog Post ‘Impartiality and Intersectionality’ 16 January 2018: <http://blogs.icrc.org/law-and-policy/2018/01/16/impartiality-and-intersectionality/> [↑](#footnote-ref-19)
19. The 2015 HPA Partnership review noted DFAT’s deprioritisation of dedicated programs from proposals in favour of ‘harder responses’ and mainstreaming. [↑](#footnote-ref-20)
20. 2013 IASC Statement on the Centrality of Protection; 2015 IASC-commissioned WoSR. [↑](#footnote-ref-21)
21. DG ECHO, Thematic Policy Document No 8 Humanitarian Protection: Improving protection outcomes to reduce risks for people in humanitarian crises, May 2016. [↑](#footnote-ref-22)
22. This was reported in the HAQC for the TC Winston response, noted by several Interviewees and also in the 2018 Progress Report, Australian National Action Plan on Women, Peace and Security 2012-18, Australian Government Department of Prime Minister and Cabinet. [↑](#footnote-ref-23)
23. Protection Framework (2013), Key Strategies, pages 5 and 7 respectively [↑](#footnote-ref-24)
24. Ibid (2013) page 6 [↑](#footnote-ref-25)
25. Ibid (2013) page 5 [↑](#footnote-ref-26)
26. Some survey respondents and interviewees referred to the ‘initial’ or ‘first funding package’, while others referred to the ‘first phase’ of the response. A few distinguished between the response and early recovery stating that protection was only addressed in the latter. [↑](#footnote-ref-27)
27. Live & Learn International and CARE Australia (2016), Tropical Cyclone Winston response Fiji After Action Review. p.18 [↑](#footnote-ref-28)
28. Ibid. [↑](#footnote-ref-29)
29. UNESCAP (2012), *Disability at a Glance 2012*: *Strengthening the evidence based in Asia and the Pacific*. [Online]. Available at http://www.unescapsdd. org/files/documents/PUB\_Disability‐Glance‐2012.pdf. [↑](#footnote-ref-30)
30. DFAT 2017, Humanitarian assistance in the Pacific: An evaluation of the effectiveness of Australia’s response to Cyclone Pam, Executive Summary p 3. [↑](#footnote-ref-31)
31. Ibid (2017), *Accountability to Affected Populations.* p. 62 [↑](#footnote-ref-32)
32. DFAT Humanitarian Strategy pages 8 [↑](#footnote-ref-33)
33. DFAT Humanitarian Strategy pages 8 and 24 respectively [↑](#footnote-ref-34)
34. See Principles and Good Practice of Humanitarian Donorship, Objectives and Definition of Humanitarian Action, second point which defines humanitarian principles [↑](#footnote-ref-35)
35. DFAT (2017), *Evaluation of Australia’s response to El Niño Drought and Frosts in PNG 2015-17*. [↑](#footnote-ref-36)
36. DFAT (2017), *Humanitarian assistance in the Pacific:* *An evaluation of the effectiveness of Australia’s response to Cyclone Pam*, p.53 [↑](#footnote-ref-37)
37. Ibid (2017), p.5 (see Recommendation 2) [↑](#footnote-ref-38)
38. See Key Standard 1 (Protection standards box) and Enabling Outcomes [↑](#footnote-ref-39)
39. For example, The Pacific Community (SPC) and the Pacific Islands Forum (PIF). [↑](#footnote-ref-40)
40. DFAT (2017), *Humanitarian assistance in the Pacific: An evaluation of the effectiveness of Australia’s response to Cyclone Pam*, p.50 [↑](#footnote-ref-41)
41. Key Strategy 1. [↑](#footnote-ref-42)
42. DFAT (2013) Protection Framework, p.3 see ‘Link to development box’ [↑](#footnote-ref-43)
43. Humanitarian Advisory Group 2018, *Intention to Impact: Measuring Localisation; Larissa Fast and Kate Sutton 2018, Protection in local response to disasters: Challenges and insights from the Pacific region, HPG Working Paper* [↑](#footnote-ref-44)
44. SOP #HMB-005 Developing and Approving Humanitarian Emergency Response Plans [↑](#footnote-ref-45)
45. See the HAQC Ratings Matrix. [↑](#footnote-ref-46)
46. Humanitarian Strategy, Performance Assessment Framework p 26. [↑](#footnote-ref-47)
47. SR 1. Our humanitarian response is appropriate and relevant; SR 2 Our humanitarian response is timely and effective; SR 3 Our humanitarian response is efficient and well managed; SR 4 Our humanitarian response engages affected communities and vulnerable groups; SR 5 Our humanitarian response reinforces national and local leadership and capacity as much as possible and engages international actors where necessary; SR 6 Our humanitarian response is coordinated and complementary. [↑](#footnote-ref-48)
48. Though one example referred to UK START network response in Fiji – requested from Care gender adviser during Disaster Ready consultations in Suva. [↑](#footnote-ref-49)
49. DFAT (2017), Humanitarian assistance in the Pacific: An evaluation of the effectiveness of Australia’s response to Cyclone Pam, which concluded that “DFAT did not adequately communicate its strategic intent, in relation to protection, to all partners” (p 79) and recommended more generally (recommendation 4): “Developing a short written statement, or action plan which outlines the overall purpose, strategic priorities, suite of partners and approach of Australia’s assistance and making the plan available to partners at the outset of a response.” [↑](#footnote-ref-50)
50. DFAT’s After Action Review of the response to TC Winston concluded that the response reinforced the importance of Australia’s lead role as first responder to crises in the Pacific region. [↑](#footnote-ref-51)
51. DFAT (2017), *Humanitarian assistance in the Pacific: An evaluation of the effectiveness of Australia’s response to Cyclone Pam, Executive summary*. [↑](#footnote-ref-52)
52. Including DFAT Country Information Reports, disability and gender unit analysis; AHP gender and disability analysis including CARE gender profiles; UNICEF MICS data, OHCHR reports and local civil society reports [↑](#footnote-ref-53)
53. Including the centrality of protection and need for investment at the strategic, dedicated programs and mainstreaming levels. Leaving no one behind, localization, humanitarian-development nexus and child protection need more explicit attention. The need for a broader protection risk analysis and response strategy must be explicit. Revisions should enable DFAT to report on the progress against protection commitments. [↑](#footnote-ref-54)
54. Further integrate commitments to Leaving no one behind, localization and humanitarian-development nexus. Ensure the need for child protection programming is adequately reflected. [↑](#footnote-ref-55)
55. Where feasible it should streamline and integrate existing disability and gender processes for coherence and avoid burden on DFAT staff and partners and risk of ‘too many priorities’ [↑](#footnote-ref-56)
56. In practice this would require coordination across HPD, Humanitarian Response, Risk and Recovery Branch (HMB) (DFAT), Bilateral and Regional Program and Multilateral. The challenges with this level of coordination lends support for a regional strategy referenced in recommendation 5. [↑](#footnote-ref-57)
57. This could be done through ensuring early engagement of the existing protection focal point, inclusion of protection specialist in Crisis Response Teams, and access to timely protection analysis that informs decision-making and overall strategic approach. [↑](#footnote-ref-58)
58. At a minimum this should include: timely deployment of protection specialists; protection questions in assessment temporary shelters, SRH and dignity kits, early engagement with local DPO, LGBTI and gender actors, timely protection analysis and response strategy, age, gender and diversity data and indicators, % of funding for dedicated and mainstreaming, AAP and safe and confidential PSEA measures, evidence of protection analysis central to decision making (minutes, response plans etc.). [↑](#footnote-ref-59)
59. Leverage the AHP 2017-21 commitment to invest in local communities and organisations for preparedness through Disaster Ready and find mechanism for AHP access to protection expertise to build broader protection risk and vulnerability analysis into their assessment templates. They may also be able to provide technical and organisational support to local consortium (recommendation 3). [↑](#footnote-ref-60)
60. Strategies should be informed by a broader protection risk analysis (assisted through preparedness profiles), that clearly articulate three levels of action (strategic, dedicated, mainstreaming) and necessary linkages with resilience and development investments e.g. social safety nets, conducive policy and legal environment, behavior change campaigns and service delivery. It should include child protection investments. [↑](#footnote-ref-61)
61. Initially consider pilot targets for both mainstreaming and dedicated programs in the Pacific. For example, a minimum of five and up to ten per cent budget allocation for mainstreaming protection, including AAP, throughout all sector response proposals upon receipt of a mainstreaming action plan. Match the mainstreaming allocation with a fifteen per cent target for dedicated protection programs informed by a broader protection risk analysis and response strategy. AHP may be one option to pilot such an approach. [↑](#footnote-ref-62)
62. First point listed under Key Strategy 1, *Protection in Humanitarian Action Framework*, AusAID, 2013, p. 9. [↑](#footnote-ref-63)
63. This definition was endorsed from a series of ICRC-convened seminars in 1996-1999 and adopted by the IASC in 1999 (see ‘Protection of Internally Displaced Persons’, *Inter Agency Standing Committee Policy Paper*, p. 4 December 1999, https://interagencystandingcommittee.org/system/files/legacy\_files/FINALIDPPolicy.pdf.) [↑](#footnote-ref-64)
64. Humanitarian Strategy, DFAT, 2016 p 24. [↑](#footnote-ref-65)
65. The Australian Guidelines for the Protection of Civilians (December 2015) is relevant here. It represents Australia's commitment to enhancing the protection of civilians across all international operations and engagements in which Australia is involved. [↑](#footnote-ref-66)
66. Agenda for Humanity - Annex to the Secretary-General Report for the World Humanitarian Summit, 9 February 2016 [↑](#footnote-ref-67)