ACTION AGAINST HUNGER

POLICY ON PROTECTION

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THE CENTRALITY OF PROTECTION

With the centrality of protection, Action Against Hunger aims at improving people's safety, putting them at the centre of humanitarian actions, reducing the risks they might face, and enhancing well-being and dignity for crisis-affected populations.

In a world increasingly shaped by global challenges – rapid population growth and urbanization, persistent poverty, violence and conflict, natural disasters and climate change, gender discrimination and other forms of human rights violations – more and more people are in need of humanitarian assistance.

Action Against Hunger upholds the Interagency Standing Committee (IASC) Principals Statement and Policy on the Centrality of Protection issued in December 2013[1][2][3], which states that "the protection of all affected communities must inform humanitarian decisions and responses indicating that beyond protection-mandated agencies, all humanitarians have the responsibility to protect affected communities before, during and after crises". By adopting the IASC statement, AAH commits to the incorporation of protection principles into all aspects of its interventions.[4]

SCOPE AND PURPOSE OF THIS POLICY

With the adoption of this policy, Action Against Hunger further commits to the incorporation of protection principles into its work, to ensure that its fight against hunger and delivery of aid target the most vulnerable, enhance their safety and dignity, and promote and protect their human rights. This is done in compliance with the humanitarian principles of humanity, neutrality, impartiality and independence, as well as the Core Humanitarian Standard[5][6], on which AAH's interventions are founded[7]. This policy aims at:

- Defining Action Against Hunger's conceptual framework for protection, in line with its mandate and with the existing standards in humanitarian protection;

- Guiding the organization towards common protection strategic objectives that will ultimately contribute to the creation of a safe environment for the affected communities, ensure access for all to services and rights and to save lives.

This policy on protection complements other existing institutional policies and manuals[8]. It is supported by a toolkit with a set of guiding documents and practical key actions for its effective implementation.

[1] IASC, 2013, The Centrality of Protection in Humanitarian Action, https://interagencystandingcommittee.org/principals/content/iasc-principals-statement-centrality-protection-humanitarian-action-2013

[2] The principles embodied in this statement are also set out in IASC, 2016 Policy on Protection in Humanitarian Action https://interagencystandingcommittee.org/system/files/iasc_policy_on_protection_in_humanitarian_action.pdf

[3] This is in line with the United Nations Rights Up Front Plan of Action which emphasises the imperative for the whole humanitarian system to protect people, see https://interagencystandingcommittee.org/system/files/overview_of_human_rights_up_front_july_2015.pdf

[4] This is in line with the United Nations Rights Up Front Plan of Action which emphasises the imperative for the whole humanitarian system to protect people, see https://interagencystandingcommittee.org/system/files/overview_of_human_rights_up_front_july_2015.pdf

[5] See CHS: https://corehumanitarianstandard.org/the-standard

[6] SPHERE Standards 2018 See CHS: https://corehumanitarianstandard.org/the-standard

[7] AAH, 2013, "Ensuring humanitarian principles (...)", https://www.actionagainsthunger.org/publication/2013/12/humanitarian-principles-conflict-ensuring-humanitarian-principles-are-respected

[8] Such as the AAH Gender Policy, Child Protection Policy, Conflict Sensitivity Approach, Participative Vulnerability and Capacity Approach, Methodological Approach to Advocacy, Protection from Sexual Exploitation and Abuse Policy, Safeguarding Policy, Child Safeguarding policy among others.

HUMANITARIAN PROTECTION FRAMEWORK IN ACTION AGAINST HUNGER

AAH has for over 40 years led the global fight against hunger, saving the lives of people in need and working with communities before, during and after disasters. To ensure that its interventions aim at effectively protecting people, the organisation pursues its protection work through:

✓ The endorsement and implementation of the IASC's statement on the centrally of protection and the protection risk approach;

✓ The adaptation and use of the protection framework to support and reinforce AAH's mandate and its global fight against hunger;

✓ Its technical expertise, research and innovations, advocacy and operational capacity.

HUMAN RIGHTS & NORMATIVE FRAMEWORKS

Over the last decade, human rights have gained prominence as a set of norms and standards that shape programmes and activities of humanitarian assistance. Human rights are grounded in human needs. They inform humanitarian interventions, to ensure that the needs of people affected by crises are met. This includes the right and need of access to health care, to food in good quantity and quality, to freedom of movement, to dignity, and not to suffer from violence.

The term "protection" refers to the circumstances where all people's **human rights should be respected and protected** in accordance with International Humanitarian Law and International Human Rights Law. States (and Non-State Armed Actors under IHL provisions) are the main guarantors of the respect of these bodies of law. They have the triple obligation to protect, respect and fulfil human rights toward their population, to defend and to adapt protection principles within their national legal framework. However, when States are unable or unwilling to ensure the full respect for these rights - putting people at risk of human rights violations - humanitarian actors support all women, girls, men and boys to have equal access to and enjoyment of their rights in accordance with the different bodies of law through a variety of actions or sectors of intervention. Protection can be considered as one of these sectors of interventions (in this document referred to as "targeted, integrated and stand-alone actions") and an overall approach to ensure the safety and dignity of the affected populations we serve (in this document referred to as "protection mainstreaming").

> The international legal framework for the protection of civilian populations is composed of three major bodies of law:
>
> - **International Humanitarian Law (IHL),** which governs protection of combattants and civilians during times of international and internal armed conflict;
>
> - **International Human Rights Law** contains the fundamental rights of all human beings that must be protected at all times of peace, armed conflict and disaster. The Convention on the Rights of the Child (1989) and the Convention on the Elimination of Discrimination against Women (1979) are part of IHRL;
>
> - **Refugee Law,** which outlines the rights applicable to refugees and asylum seekers.

THE PROTECTION RISK EQUATION

By committing to the IASC's statement on the centrality of protection, its definition and recommendations, AAH ensures that its interventions are protection-oriented, seeking to prevent, mitigate or respond to actual and potential risks faced by affected communities, including violations of international humanitarian and human rights laws. This requires a constant analysis of the risks people face, of threats, vulnerabilities and capacities of affected persons, and of the commitment and capacities of duty bearers to address risk factors". According to the protection risk approach, civilian protection is achieved by reducing threats and vulnerabilities, while increasing the populations' capacities to respond and recover from them.

$$\text{PROTECTION RISKS} = \frac{\text{THREATS} \quad X \quad \text{VULNERABILITY}}{\text{CAPACITIES}}$$

Figure 1: Protection Risk Equation

THREATS: attacks and/or policy of state and non-state actors harming civilians; confinement and isolation of certain populations (e.g. minority groups); forced deprivation of basic services; exploitation of certain groups such as displaced women or children; increase in intimate partner violence and abuse or neglect of children as a result of war, conflicts and natural disasters.

VULNERABILITIES: affected populations' degree of exposure to harm; marginalisation and discrimination due to age, gender roles, location, ethnicity, disability, family status, health conditions; lack of freedom of movement and speech, lack of access to basic services and livelihood or income activities.

CAPACITIES: knowledge, experiences and networks of affected populations that impact their ability to withstand adverse effects of crises. As protection needs arise and when victims of violations are unable to defend their basic interests and capacities to cope with exposure to risks.

The risk equation entails that protection risks faced by affected populations are directly proportional to threats and conditions of vulnerability, and inversely proportional to people's capacities to respond to those. Protection needs depend on the level and nature of the threat; the conditions or situations of vulnerability; and people's capacities to cope with them. A regular analysis of threats, vulnerabilities and people's capacities provides AAH's global strategy with the evidence-based for programming, advocacy and dialogue to positively influence policies and behaviours in support of a more favourable protection environment for affected populations.

PROTECTION AND THE FIGHT AGAINST HUNGER

In addition to decreasing the risks faced by populations in its context of intervention, the protection framework supports and reinforces AAH's global fight against hunger. AAH's strategy for nutrition adapts the UNICEF conceptual framework on the causes of undernutrition,[10][11] and takes into account the immediate, underlying and basic causes that determine the nutritional status of individuals and populations.

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[10] AAH, 2016, International Strategic Plan ISP https://www.actionagainsthunger.org.uk/publication/international-strategic-plan-2016-2020
[11] Lancet Series, 2016, Maternal and Child Nutrition, https://www.who.int/nutrition/publications/lancetseries_maternal_and_childundernutrition/en/

Evidence-based studies show[12] that direct actions to address the immediate determinants of under-nutrition can be further enhanced by acting on some of its basic and underlying causes. **Neglect, discrimination, abuse, exploitation and violation of rights** may prevent people from fulfilling their needs and having full enjoyment of their rights including access to and provision of adequate food, water, health, lands, etc. Here, the protection framework comes to reinforce AAH's fight against hunger by identifying protection risks, threats and acts upon them, to contribute to the creation of a protective environment for affected populations in a holistic way. The use of the protection framework supports the organisation to provide affected populations with the best environment to fulfil their needs and access to their entitlements and reach its ultimate goal of a world free of hunger.
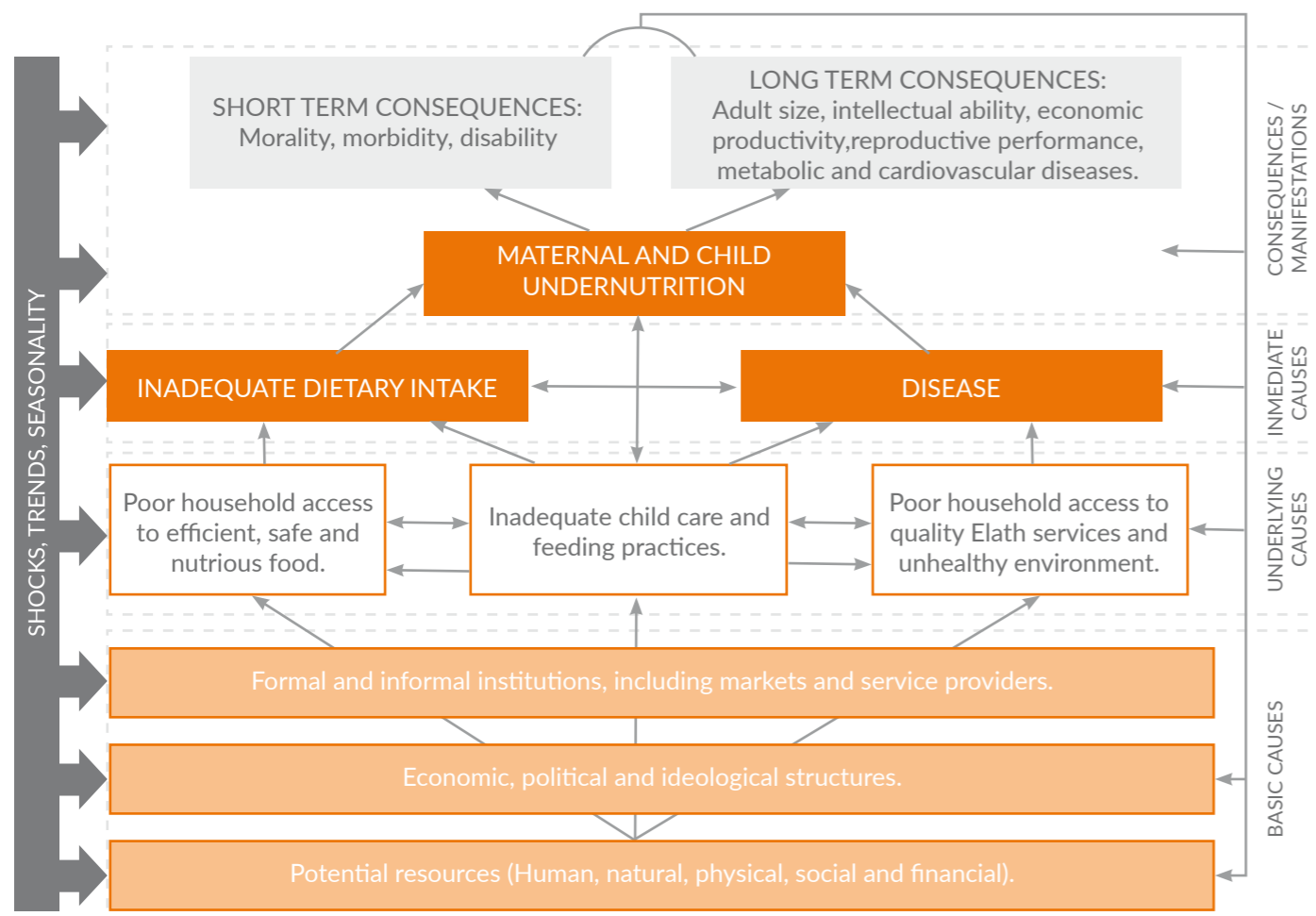

Figure 2: AAH Conceptual Framework of Undernutrition

PROTECTION EXPERTISE, ADVOCACY, KNOWLEDGE & OPERATIONS

AAH has adapted the international protection framework into its mandate and scope of work. To ensure protection, AAH applies all aspects of its theory of change at all times in order to have maximum impact.[13] Analysing risks of threats, populations' vulnerabilities and capacities informs the design of AAH interventions at different levels from global strategies to programming, resulting in protection mainstreaming actions and/or integrated and standalone protection targeted actions depending on the identified populations' needs and relevant available in-country resources.

[12] Meera Shekar, Leslie Elder, Harold Alderman etal. 2017, WB Report on Improving Nutrition Through Multi-sectoral Approaches
[13] IASC, 2016, Policy on Protection in Humanitarian Action, page 14

TECHNICAL EXPERTISE AND INNOVATION

AAH contributes to evidence-based and the most effective ways to ensure protection and enhance the global fight against hunger. This includes adapting its programmes and strategies to the most innovative and impactful solutions. Through investing in research and technical development, AAH in collaboration with technical and research institutions, produces evidence-based papers, methods, and programme designs, shared with global, national and local fora to create and share knowledge for all.

A LEGITIMATE AND POWERFUL VOICE FOR CONNECTION AND MOBILISATION

AAH's advocacy actions ensure that the populations' demands for preventive, responsive and remedial measures regarding the violation of their human rights are heard by states, organized armed groups, international organizations and partners.
AAH's actions aim at holding parties to IHL, HRL and refugees law accountable for their breach of obligations in safeguarding human rights.

TRANSFER OUR KNOWLEDGE AND EXPERTISE TO BUILD RESILIENCE

AAH strives at all times to engage and learn from the communities with whom it works and share its outcomes with local and international partners. By sharing its expertise and developing new tools while learning from local actors and communities, AAH's ambition is to increase countries and systems' autonomy to fight against human rights violations and hunger. This includes choosing and training its employees with renowned academic partners, setting up internal training systems to obtain essential skills.

OPERATIONAL CAPACITY FOR AND WITH THE PEOPLE

AAH operational capability ensures reaching affected populations quickly and efficiently, including during and after emergencies. AAH strives to be as close as possible to end users and mainstream protection in all these strategies and programs. According to the needs, targeted protection interventions are developed for reducing the risks and exposure of the populations to protection and/or to hunger.

Figure 3: AAH International Strategic Policy 2 & 3   © Raphaël Mosca for Action Against Hunger

AAH'S TWIN-TRACK APPROACH TO PROTECTION

Action Against Hunger's protection framework follows a twin-track approach:

I. MAINSTREAMING PROTECTION: protection principles and promoting meaningful access, safety and dignity in humanitarian aid is incorporated across all department, strategies and programs and is considered through policies, ways of working, SOPs and procedures for institutional frameworks and at each stage of the project cycle management (PCM);

II. TARGETED ACTIONS: consist of actively contributing to reduce the risk and exposure of the affected population to those. This includes stand-alone protection actions such as MHPSS, advocacy on protection, child protection,) and integrated protection (responses from one or more assistance sectors - WASH, health, food assistance, nutrition, care practices, etc.) in order to achieve a protection outcome or a combination of protection sector responses with one or more of the other sectors (ie MHPSS and FSL or child protection, care practices and nutrition, etc).

I. MAINSTREAMING PROTECTION

AAH mainstreams protection by incorporating the four protection mainstreaming principles[14] in its institutional and country strategies, contributing to the development and implementation of the SPHERE standards on protection[15] and adhering to the core humanitarian standards (CHS). AAH ensures mainstreaming of protection in all its actions, services and departments to[16]:

1. PRIORITISE SAFETY AND DIGNITY AND AVOID CAUSING HARM:

To prioritise safety and dignity, Action Against Hunger works to prevent and minimize as much as possible any unintended negative effects of its interventions to avoid increasing people's situations of vulnerability to both physical and psychological risks. AAH's assistance aims at comprehending local sensitivity, potential sources of tension, cultural constraints, taboos and the affected population's knowledge, attitudes and practices through analyses that help in increasing organizational capacities, and adapt its policies and programmes design, using a 'do no harm' approach.
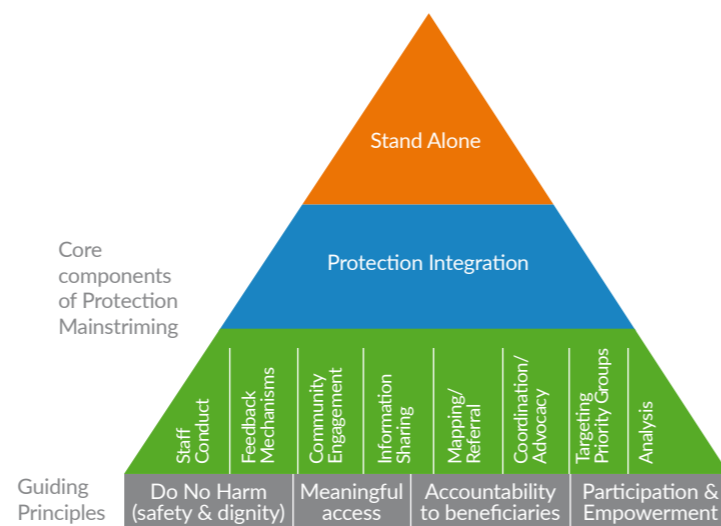

Figure 4: Global Protection Cluster, the Protection Pyramid

2. ENSURE MEANINGFUL ACCESS TO PROCESSES AND SERVICES:

AAH strives to provide needs and rights-based assistance to populations affected by crises avoiding discrimination due to age, sex, gender, sexual orientation, nationality, ethnicity, religion, and disability. It ensures that physical, economic and social barriers are minimised and that services are adequately provided, within safe, easy reach, and available to all community groups based on their needs. Apart from incorporating meaningful access standards within all its operations and upholding it in national and global coordination mechanisms, AAH actively advocates for the respect of international humanitarian law, by claiming the right to a safe and meaningful humanitarian access to populations in need of humanitarian assistance. AAH aims at highlighting populations' demands for the respect of their basic human rights, by holding states or duty holders accountable for their protection obligations through influencing key stakeholders at the local, national, regional and international levels, to ensure that the principle of access for the most vulnerable is preserved and that country-specific issues do not remain unaddressed, forgotten or politicised.

3. ACCOUNTABILITY TO THE AFFECTED POPULATION:

Action Against Hunger integrates the IASC commitments on Accountability for Affected Populations (AAP) through policies and tools that ensure person-centred approaches.[17] Accountability in AAH is ensured through the set-up of culturally and contextually appropriate mechanisms through which the affected populations can measure the adequacy, quality, and timeliness of the organisation's interventions and address positive and negative feedback, concerns and complaints, such as feedback mechanisms, mechanisms for participation and empowerment, protection of confidential data and ensuring of informed consent, Safeguarding, PSEA, Child Safeguarding procedures and Data Protection protocols.[18] AAH supports as well people and communities'demand for accountability from States/duty holders.

4. PEOPLE'S PARTICIPATION AND EMPOWERMENT:

Action Against Hunger supports the development of the population's self-protection demands, capacities, autonomy and self-efficacy through person-centred approaches, learning from affected populations to inform its global strategy and transfer its expertise in an appropriate way to individuals, local structures and partners organisations. AAH tries to maximize the participation of its partners and the community where it works through a two-way learning process building from and towards local capacities. AAH interventions support community participation, engagement and empowerment, context-specific adaptations, evidence-based programming and research of best possible solutions. AAH supports peoples' and communities' empowerment through the amplification of their voices and possibility to engage directly at local, national and/or international levels within governance systems, as well as by supporting their claims for the prevention, response and remedy for the violation of their human rights.

As part of mainstreaming protection, Action Against Hunger commits to include gender, age, disabilities and child safeguarding considerations and practices at all levels, in its field operation, advocacy strategies, technical policies and guidance and across its institutional mechanisms (such as figure 4: AAH Code of Conduct, Safeguarding Policies, Feedback and Complaint Mechanisms, inclusive needs and context analysis). [19] [20]

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[15] IASC, 2016, Policy on Protection in Humanitarian Action
[16] The SPHERE handbook (2018), https://spherestandards.org/wp-content/uploads/Sphere-Handbook-2018-EN.pdf
[17] For practical guidance on how to ensure mainstreaming protection, please refer to the key actions document annexed.

[18] For more information please see AAH policy on Gender, AAH Charter and AAH Child Safeguarding policy
[19] For more information please see AAH policy on Gender, AAH Charter and AAH Child Safeguarding policy
[20] Further guidance on how to mainstream protection in the project cycle, can be found in the Protection MainstreamingToolkit.

II. TARGETED PROTECTION

While all of Action Against Hunger is committed to mainstreaming protection at all levels, targeted protection actions are developed according to context needs and specificities. They require appropriate expertise and in-country capacity to be implemented. Integrated and stand-alone protection actions aim at directly reducing the protection risks faced by affected populations following the protection risk approach through coordinated actions implemented at three levels of intervention[21]:
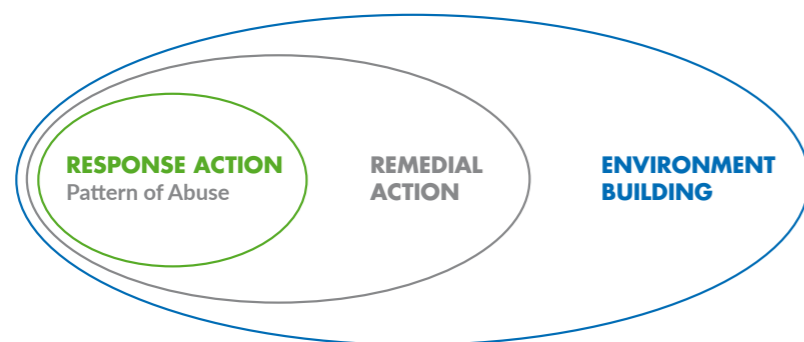

Figure 5: ICRC, the Protection Egg Model

RESPONSIVE ACTION: The most immediate sphere of action, which is closest to the violation, includes a range of actions that aims to stop, prevent or alleviate the worst effects of the harm on affected communities.

REMEDIAL ACTION: The second sphere is concerned with assisting and supporting people after violations in the recovery process, aimed at restoring people's dignity and to ensure adequate living conditions after they have suffered from harm.

ENVIRONMENT BUILDING: The third sphere of actions aims at moving society as a whole towards norms that prevent or limit current and future violations, harms and abuses that consolidate political, social, cultural and institutional norms conducive to protection. Responsive, Remedial and Environment building actions are developed through the use of two sub-approaches, namely integrated and stand-alone protection: [22]

Integrated protection actions where all sectors, wherever feasible and appropriate, develop one or more protection objectives in the design of their actions. In integrated protection actions, responses from one or more sectors (Nutrition & Health, FSL, MHCP, WaSH) aim at achieving one or more protection outcomes in addition to the sector specific outcomes[23].

Stand-alone protection actions that aim at achieving mainly protection outcomes by responding primarily to identified protection risks and threats (child protection issues, mental health risks, abuses, violence, discrimination or abuses on a group, etc.).

AAH NICHES IN PROTECTION

Integrated and stand-alone protection actions reflect the organisation's mandate, knowledge and capacity and are articulated in its specific niches of expertise. The following section describes AAH's protection niches that can be developed as integrated actions if combined with other sectors' outcomes, or as stand-alone actions if populations' needs, context & risks analyses guide on the need to respond to protection concerns alone.

A MULTISECTORIAL INTEGRATED APPROACH

When in a specific context protection risks cannot be reduced or mitigated by mainstreaming protection alone, AAH's sectors of intervention wherever feasible and appropriate, can develop one or more protection objectives in the design of their activities through multi-sectorial integrated actions. With this aim, a protection analysis developed as part of a need or context assessment or as an individual activity, inform all sectors strategies of existing or potential threats and vulnerabilities in the context of intervention.

EXAMPLES OF PROTECTION MULTISECTORIAL INTEGRATED ACTIVITIES

✓ Development of SOPs for health/nutrition workers and training on safe and confidential referral of cases of maltreatment, violence and gender-based violence against children and adults.

✓ Protective mitigating strategies to support access to cultivable land for discriminated populations that might resort to negative coping strategies (survival sex, child labour, child marriage, etc.) due to lack of livelihood.

✓ Provision of alternative cooking stoves to vulnerable population at risk of malnutrition to mitigate risks of violence when collecting firewood in at-risk areas.

✓ Protection and GBV safety audit in WaSH facilities to ensure safe, dignified and meaningful access of all categories of populations including children, people at-risk of violence, the elderly and people with disabilities.

✓ Training for nutrition workers to identify signs of child maltreatment among programmes' participants for safe and confidential referral to child protection

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[21] ICRC, Giossi Caverzasio, Sylvie, 2001, Strengthening Protection in War: a Search for Professional Standards, Geneva
[22] GPC, 2014, Protection Mainstreaming Training Package, page 29, http://www.globalprotec¬tioncluster.org/en/areas-of-responsibility/protection-mainstreaming.html

[23] DG ECHO, 2016, Humanitarian Protection, Policy Document https://ec.europa.eu/echo/sites/echo-site/files/policy_guidelines_humanitarian_protection_en.pdf

Once protection risks are identified and analysed, AAH's sectors strategies can develop specific protection objectives in addition to the sectors' outcomes. A multi-sectorial integrated approach to protection involves deliberately designing and implementing programmes with protection and one or more other sectors to prevent and respond jointly to violations of human rights, abuse, neglect, exploitation and violence, building on the cooperation, outcomes and impacts of other sectors. Here, integrated protection actions aim at tackling one or more protection risks that take into account the specific vulnerabilities of at-risk groups. Multisectorial integrated actions ensure a holistic understanding of people's well-being achieved through the unique capacities of each collaborating sector, using sectoral specialities to meet that goal. Analysing protection risks and preventing, mitigating or responding to them through other sectors' strategies allows for nutrition, health, FSL, MHCP and WASH interventions to actively incorporates safety, security and dignity outcomes and objectives into stheir sectoral programmes to prevent and respond to identified risks that might put them at further harm.

CHILD PROTECTION & CARE PRACTICES

AAH's child protection actions draws on its expertise from childcare and care practices[24] and aims to empower communities to reinforce children's full developmental potential through direct support and by strengthening their protective environments (parents, community, government policy, etc.). Activities to ensure protection of children are developed as stand-alone or integrated actions depending on the identified needs and context.[25] While programmes are open to all children, the most vulnerable families are targeted, including children who are malnourished (see below section – children under 5). In emergency contexts, where children are at greater risk of being victims of grave violations such as mistreatment, sexual exploitation, killing and maiming, AAH provides child protection services to children of all ages. This includes referral to basic services through management of child protection cases, mental health and psychosocial support services (MHPSS), caregiver support and strengthening of existing child protection network (schools/community based/laws). This aims at diminishing the effect of exposure to violence and conflict, preventing the recurrence of maltreatment and abuse and to improve children's abilities to cope with and recover from psychological suffering. Using a holistic approach, AAH promotes the active integration of prevention and response actions for cases of child protection. Further guidelines of integrated and stand-alone actions to prevent and respond to child protection risks can be found in the annexed protection toolkit.

CHILDREN UNDER 5:

Due to the nature of its work, AAH has developed a strong expertise focused on very young children that are particularly vulnerable to maltreatment and neglect. The formative years from birth to age eight play a vital role in the foundation of children's intelligence, personality and social behaviour.[26] AAH especially targets **from conception to 5** year-old children, supporting Early Child Development (ECD) to strengthen children's resilience through multi-sectoral interventions on "nurturing care" that facilitate the presence of stable, responsive caregivers, access to early learning and stimulation through play, availability of nutritious food, immunisations and health care. To this end, as part of its holistic approach, AAH provide direct support to very young children and caregivers on care practices and mental health[27], focusing on addressing their developmental needs both in emergencies from transition and recovery phases and development settings.

FAMILIES W/ PREGNANT WOMEN &/ CHILDREN UNDER 2:

Pregnancy is a very sensitive period for the mother and the unborn child. Depression and anxiety in women doubles during pregnancy and is even higher during the year following delivery[28]. Untreated maternal mental health increases poor child development and growth. Poverty, migration, extreme stress, exposure to violence, emergencies, and scarce social support have an even greater negative effect on caregivers' capacities and resources. These elements can increase abuses, endangerment, and negligence in the long term. AAH recognises the need to focus on families with pregnant women and children under 2 when delivering protection services, including MHPSS, support to pregnant and lactating women, decrease of workload and provision of psychological and emotional support, group discussions and sharing of information on optimal support care practices for infants and young children. When needed, mothers and caregivers are supported with individual case management and MHPSS service provision if at risk of physical and psychological violence and abuse, including sexual and gender-based violence.

MENTAL HEALTH & PSYCHOSOCIAL SUPPORT:

Protection risks can impact the mental health and psychosocial well-being of individuals, families' relationship, and communities' links.[29] In reverse, treating psychological suffering, strengthening relations between communities and family members, assists recovery, and helps people become more active and autonomous, to make better use of resources and services and to claim their rights. In AAH, MHPSS activities target all the layers of the IASC MHPSS pyramid from providing information to persons and helping them to feel safer to specialised clinical services. These activities help people and communities to further develop and reinforce their capacities, decrease their vulnerabilities, contributing to reduce protection risks. AAH considers that MHPSS services are a core element in the child protection, care practices and when preventing and responding to violence, and systematically integrates this component within prevention and response interventions in those fields.[30][31]

VIOLENCE INCLUDING SEXUAL AND GENDER-BASED VIOLENCE:

Violence, including sexual and gender-based violence (SGBV) is largely rooted in attitudes that condone its perpetuation within the family, the community and the society at large.[32] Cases of violence, coercion and abuse are identified and addressed through preventive, mitigative and responsive actions to alleviate the suffering of the individual violation and to prevent its recurrance at individual, community and societal level. During and after crises, where women, men, boys and girls suffer even more from violence and extreme distress, AAH provides MHPSS and medical support services, and case management to ensure a comprehensive approach for their protection. Preventive actions tackle the root causes of violence acting on the community and societal level through social and behaviour change programmes that help change community behaviours, supporting victims and survivors and advocating for their rights by working with community groups, local institutions and governments. Responsive actions ensure provision of protection services through assistance to victims and survivors of violence, sexual and gender-based violence, including access and referral to basic services, and provision of health care and psychological support to recover from the long-term effects of violence and to restore feelings of dignity and safety.[33] Using a holistic approach, AAH

[24] AAH MHCP Manual on integration of Child Care Practices into Nutrition Programs: https://www.actioncontrelafaim.org/publication/manual-for-the-integration-of-child-care-practices-and-mental-health-into-nutrition-programs/

[28] WHO, Maternal Mental Health and Child Health and Development
[29] AAH, MHCP The Psychoogical Impact of Humanitarian Crisis https://www.actionagainsthunger.org/sites/default/files/publications/ACF_Psychosocial_Impact.pdf
[30] AAH, MHCP Policy on Mental Health and Child Care practices: https://www.actioncontrelafaim.org/publication/politique-sante-mentale-et-pratiques-de-soins-infantiles/
[31] Inter-Agency Standing Committee (IASC) (2007), IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings, available at: https://interagencystandingcommittee.org/system/files/iasc_guidelines_on_mental_health_and_psychosocial_support_in_emergency_settings.pdf
[32] UNHCR, Action against Sexual and Gender-Based Violence: An Updated Strategy https://www.refworld.org/docid/4e01ffeb2.html

promotes the active integration of prevention and response actions to cases of violence, sexual and gender-based violence[34] into all AAH's sectors and through protecton from sexual exploitation and abuse mechanisms (PSEA). Further guidelines of integrated and stand-alone actions to prevent and respond to instances of violence, sexual and gender-based violence can be found in the annexed protection toolkit.

ADVOCACY

The causes of hunger and vulnerabilities are manifold and AAH recognizes the importance of making the voice of the most vulnerable heard, drawing attention to the dynamics that underlie crises, the causes of vulnerabilities and the inequalities that sustain malnutrition. AAH takes into account contributing political factors and recognises that the non-compliance by some state and non-state actors with their international and domestic human rights obligations is a major cause of hunger and vulnerability. These breaches in obligations take various forms, such as the use of hunger as a method of warfare, the adoption and implementation (or lack of) of social and economical policies resulting in food and nutrition insecurity as well as the absence or unsufficiant provision of basic services, including those needed to detect, treat and prevent undernutrition. AAH's advocacy teams support local partners' and communities' claims for lasting changes in policies through local, national and international advocacy activities and campaigns. Even though AAH's and its partners' aims vary with contexts, overarching themes include and are grounded in the promotion, respect and implementation of international human rights and humanitarian laws, raising awareness over restriction of access by the affected individuals to humanitarian assistance and when possible to reinforced government owned services, and mobilizing other actors and affected populations within and beyond the humanitarian system to contribute to collective protection outcomes.

COORDINATION AND INFLUENCE

AAH's protection strategy and approach is pursued at local, country and global level. Through mission-based case studies and participation in key international coordination groups and mechanisms on humanitarian aid effectiveness (IASC, ICVA, Voice), AAH aims to influence the global coordination system to enable humanitarian aid to reach the most vulnerable people. AAH coordinates with humanitarian actors at all levels to ensure that by jointly identifying needs, setting common priorities for humanitarian responses and focusing on achieving collective results. Being an active member of the United Nations cluster mechanism, Action Against Hunger endorses the Clusters Accountability Framework and as such commits and contributes to the Principle for mutual accountability.[35]AAH is active in inter-agency coordination mechanisms at local, national and global level, including the Global Protection Cluster (GPC), the GBV and Child Protection Areas of Responsibility[36], the national and local MHPSS Working Groups, AAP-PSEA WG, continuting to the development of global policy and practice (e.g. IASC Policy on Protection, MHPSS, ACPHA), and other coordination mechanisms.

[33] For guidance on SGBV service provision, please see the sector specific guidelines
[34] See IASC guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action https://gbvguidelines.org/wp/wp-content/uploads/2015/09/2015-IASC-Gender-based-Violence-Guidelines_lo-res.pdf
[35] Principle for mutual accountability replaced the Last resort Principle in 2012.
[36] IASC, 2016, Policy on Protection in Humanitarian Action, page 28

GLOSSARY OF TERMS

CHILD PROTECTION: The prevention of and response to abuse, neglect, exploitation and violence against children in humanitarian action.

COERCION: Forcing someone to do something against his or her will.

DATA PROTECTION: The systematic application of a set of institutional, technical and physical safeguards that preserve the right to privacy with respect to the collection, storage, use and disclosure of personal data. Given the sensitive and personal nature of protection information, protection information management must serve specific information needs and purposes. The purpose must be clearly defined and be proportional to both the identified risk and costs vis-à-vis the expected response.

DIVERSITY: Refers to different values, attitudes, cultural perspectives, beliefs, ethnic background, nationality, sexual orientation, gender identity, abilities, health, social status, skills and other specific personal characteristics. While the age and gender dimensions are present in everyone, other characteristics vary from person to person.

DEPRIVATION: Preventing people from accessing the goods and services they need. This can be deliberate or unintended, direct or indirect. It may include discrimination.

GENDER: Refers to the socially constructed roles for women and men, which are often central to the way in which people define themselves and are defined by others. Gender roles are learned, changeable over time, and variable within and between cultures. Gender often defines the duties, responsibilities, constraints, opportunities, and privileges of women and men in any context. Gender equality refers to the equal enjoyment of rights, responsibilities and opportunities of women, men, girls and boys. Gender equality implies that the interests, needs and priorities of each gender are respected.

GENDER-BASED VIOLENCE: Gender-Based Violence (GBV) is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty.

NEGLECT: The intentional or unintentional failure of a caregiver – individual, community, or institution (including the State) with clear responsibility by custom or law for the well-being of the child – to (a) protect a child from actual or potential harm to the child's safety, well-being, dignity and development or (b) fulfil that child's rights to survival, development, and well-being, when they have the capacity, ability, and resources to do so.

NON-DISCRIMINATION: The principle of non-discrimination guards against unjust distinction in the treatment of different groups or individuals, on the basis of race, colour, sex, age, language, religion, political or other opinion, national or social origin, property, disability, birth or other status. This includes not being singled out for harm, denied access, unable to assert their rights, or otherwise disadvantaged. Activities aimed at ensuring that people are not singled out for harm, denied access, unable to assert their rights or otherwise disadvantaged on the basis of their race, colour, sex, language, religion, political or other opinion, national or social origin, property, disability, birth, age or other status, i.e. discriminated against.

PROTECTION: A concept that encompasses all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and spirit of human rights, refugee and international humanitarian law. Protection involves creating an environment conducive to respect for human beings, preventing and/or alleviating the immediate effects of a specific pattern of abuse, and restoring dignified conditions of life through reparation, restitution and rehabilitation. (OCHA)

PROTECTION MAINSTREAMING: Different actors use different definitions for this term. The Global Protection Cluster Protection Mainstreaming Task Team defines protection mainstreaming as the process of incorporating protection principles and promoting meaningful access, safety and dignity in humanitarian aid. Some actors use the terminology of "safe programming," either as synonymous with protection mainstreaming or as a variation on protection mainstreaming. Conversely, some actors consider the safety, dignity and accessibility of aid (or "safe programming") to be primarily about meeting the basic minimum technical standards of humanitarian assistance and as distinct from protection itself.

PROTECTION INTEGRATION: Protection integration involves incorporating protection objectives into the programming of other sector-specific responses (i.e. beyond the protection sector response) to achieve protection outcomes. Integrated protection programming requires all humanitarian actors to commit, wherever feasible and appropriate, to a protection objective in the design of their activities. It can therefore support the system-wide commitment to the centrality of protection because it relies on different actors (i.e. protection and non-protection) to work individually and together as part of a multi-sector humanitarian response.

PROTECTION OUTCOMES: A response or activity is considered to have a protection outcome when the risk to affected persons is reduced. The reduction of risks, meanwhile, occurs when threats and vulnerability are minimized and, at the same time, the capacity of affected persons is enhanced. Protection outcomes are the result of changes in behaviour, attitudes, policies, laws, knowledge and practices on the part of relevant stakeholders.

PROTECTION STANDALONE: Structures and policies developed by the UN, States and other humanitarian actors, and based in international humanitarian law, human rights and refugee law, to protect vulnerable populations from the effects of armed conflict, ranging from the most immediate priorities of minimizing civilian casualties to more long-term priorities of promoting the rule of law and security, law and order within a State.

TARGETED PROTECTION ACTIONS: Protection actors and humanitarian actors with protection expertise play a key role in ensuring the implementation of integrated and/or stand alone protection activities and services that aim to meet targeted protection objectives.

VIOLENCE: The act or threat of physical or psychological abuse.

LIST OF ACRONYMS

AAH Action Against Hunger

AAP Accountability to Affected Populations
AoR Area of Responsibility

ACPHA Alliance for Child protection in humanitarian action

CBCP Community-based child protection

CHS Core Humanitarian Standard on Quality and Accountability

CM Case management

CMTF Case Management Task Force

CoC Code of Conduct

CTFMR Country Task Force for Monitoring and Reporting (on grave violations against children)

CP Child protection

CP AoR Child Protection Area of Responsibility

CPCM Child protection case management

CPIMS Child Protection Information Management System

CPWG Child Protection Working Group

CRC Convention on the Rights of the Child

DDR Disarmament, Demobilization and Reintegration

DRR Disaster Risk Reduction
ECD Early Childhood Development

ECHO European Community Humanitarian Office

FGD Focus Group Discussion
FGM/C Female Genital Mutilation/Cutting

FSL Food Security and Livelihood
FTR Family Tracing and Reunification

GBV Gender-based Violence

GBV AoR Gender-based Violence Area of Responsibility

GBVIMS Gender-based Violence Information Management System

GPC Global Protection Cluster

HR Human Resources

IASC Inter-agency Standing Committee

ICRC International Committee of the Red Cross / Crescent

IDTR Identification, Documentation, Tracing and Reunification

IDP Internally Displaced Persons

IEC Information, Education and Communication

IHL International Humanitarian Law

IHRL International Human Rights Law

IM Information Management / Manager

INGO International non-governmental Organisation

IOM International Organisation for Migration

IPV Intimate Partner Violence

IRC International Rescue Committee

IYCF Infant and Young Child Feeding

KII Key Informant Interview

LGBTI Lesbian, Gay, Bisexual, Transgender and Intersex

MHCP Mental Health and Care Practices

MHPSS Mental health and Psychosocial Support

MRM Monitoring and Reporting Mechanism (on grave violations of children's rights in situations of armed conflict)

MEAL Monitoring, Evaluation, Accountability and Learning

NGO Non-governmental organisation

OCHA UN Office for the Coordination of Humanitarian Affairs

OHCHR Office of the High Commissioner for Human Rights

PCM Programme Cycle Management

PEP Post-exposure Prophylaxis

PFA Psychological First Aid

PIM Protection Information Management

PLW Pregnant and Lactating Women

PSEA Protection from Sexual Exploitation and Abuse

SGBV Sexual and Gender-based Violence

SOP Standard Operating Procedures

SRH Sexual and Reproductive Health

STI Sexually Trasmitted Infections

UN United Nations

UNHCR United Nations High Commissioner for Refugees

UNICEF United Nations International Children's Fund

VAWG Violence Against Women and Girls

WASH Water, Sanitation and Hygiene

WFP World Food Programme

WHO World Health Organisation

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