



A Study on Protection and Accountability in Haiti following the Earthquake in January 2010

Findings from the field



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A study commissioned by the Disasters Emergency Committee



February 2013

Table of contents

1. Executive summary.....	5
2. Scope of the study and methodology.....	6
3. Context and background.....	8
3.1 Haiti before 2010.....	8
3.2 After the earthquake.....	9
3.2.1 The status of vulnerable groups.....	14
3.2.1.1 Children.....	15
3.2.1.2 Women	15
3.2.1.3 People with disabilities.....	16
3.2.1.4 Elderly.....	17
3.3 The response by DEC members.....	17
4. Definitions and perspectives.....	20
4.1 Protection.....	20
4.2 Applications and definitions in practice.....	22
5. Protection mainstreaming in emergency disaster response.....	22
6. Accountability.....	24
6.1 Shared language of accountability.....	24
6.2 Organisational challenges incorporating HAP principles into protection programmes.....	25
6.3 A note on the use of Sphere Standards.....	27
7. Accountability and its relationship to protection in practice.....	28
7.1 Similarities between protection and accountability.....	28
7.2 Differences between protection and accountability.....	29
7.3 Reflection.....	30
8. Observations from the 2010 Haiti earthquake response.....	32
9. Recommendations to DEC members	32
10. Other observations and recommendations.....	34

Annexes:

I. Glossary of abbreviations.....	36
II. DEC-Haiti protection and accountability study final schedule.....	37
III. Resources and tool-kits for protection in emergencies.....	38
IV. Bibliography.....	39

List of boxes

Scope of the study timeline 7

Case Study #1: Assessing risks and building teams prior to a disaster results in increased staff cohesion and effectiveness 11

Case Study #2: Older, single woman rebuilding her home on her own 13

Case Study #3: World Vision reached out to the disabled to ensure that under supported vulnerable populations receive aid 15

Case Study #4: Engagement and participation of local actors are both essential for a relevant and effective response 16

DEC Funded Members 2010-2012 18

Case Study #5: Women affected by rape and domestic violence turn to young mother for support in Corail camp 19

Haiti's Protection Legislation 20

Case Study #6: How Oxfam's monitoring addresses gaps in mainstreaming protection 23

Case Study #7: Christian Aid works through local community-based partners 25

Case Study #8: Men express a need to find ways to expand and broaden information that is discussed with select members of the community 27

Case Study #9: Managing complaints by looping back to communities fosters increased trust among beneficiaries 29

Case Study #10: AgeUK organizes community volunteers to ensure that the needs of elderly beneficiaries are met 30

Figure 1: The changing relationship between protection and accountability 32

Testing a joint complaint response mechanism 35

Acknowledgments

The authors of the study would like to thank the Disasters Emergency Committee, particularly Annie Devonport, Head of Programmes and Accountability for her support and guidance throughout the process of the study. For their support on the ground during the information gathering phase of the study, much appreciation goes out to the staff at Oxfam, who provided invaluable logistical and coordination support to the study team. The representatives that the study team interviewed and worked with in Port-au-Prince were open and generous with their experiences, challenges and lessons, which are included in this report. Many of the people the study team met with on the ground have been working assiduously since the advent of the earthquake. We thank them all for their inspiring commitment to the people of Haiti. We hope that the information herein will be helpful as we all continue to find ways of working more inclusively, effectively and responsibly to address the needs of the most vulnerable during and after disasters worldwide.



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PWOTAKSYON means 'Protection' in Creole.

The photos on the cover were taken by volunteer youth from ENPAK.

1. Executive summary

Haiti's 2010 earthquake created the largest urban disaster in modern history. It left massive destruction in terms of human lives and suffering killing tens of thousands of people and displacing over one out of every five Haitians from their homes. Humanitarian aid groups rushed in to help and a massive humanitarian response was launched. The vulnerabilities through which this disaster occurred were highly pronounced. In the last three years the shocks of other hazards – namely cholera and hurricanes – have delayed the transition to development. As the country continues to deal with the aftermath of these events, concerns about a number of sectors, including protection, remain.

This study on protection and accountability in Haiti was commissioned by the Disasters Emergency Committee (DEC) in the autumn of 2012. Primary research was carried out in Port-au-Prince in January, 2013. This involved a literature review, semi-structured interviews, focus group discussions and a participatory workshop involving DEC members. The purpose of the study is to add to the existing body of knowledge around protection and accountability in practice. The focus of the study is on how agencies responding to the earthquake addressed protection in their activities, and whether these approaches contribute to beneficiary protection or indeed increased their vulnerability.

There are at least five key findings. First, staff tended to be aware of challenges and were oriented toward a practical approach that prevented widespread replacement of protection by accountability. Second, community representation occurred in unexpected ways and organisations should approach community partnerships with a critical eye by reviewing power relations, networks and other contextual factors. Third, there has been an uptake of different initiatives and reforms such as the Humanitarian Accountability Project (HAP), Sphere Standards and protection-based programming. This follows sustained efforts by the groups behind these efforts and within DEC members themselves. Fourth, more needs to be done to ensure that organisations are conducting more detailed initial assessments. A lack of comprehensive and up-to-date information is an ongoing challenge in the design, revision and evaluation of disaster response programmes. This issue is further compounded by the limited or non-existent baseline data. Finally, definitions of protection are often different between field staff and their home office colleagues, partners or donors. These groups need to ensure that they are working with a common understanding of protection in order to diminish the potential of misunderstandings from one level to the next. To foster a shared understanding, the study report outlines the different ways in which various groups define, and thereby approach, protection.

As detailed in this report, in the aftermath of the earthquake, organisations designed and implemented both standalone protection programmes and programmes that incorporated protection mainstreaming across sectors. Decisions about mainstreaming were based on the perceived needs of vulnerable populations at different phases of the emergency. The report outlines some of the most common approaches, and why they were used during different time periods. Highlighted within the report are a number of case studies and observations. The report also includes recommendations to DEC members to advance protection and accountability issues in programme design and implementation during emergency disaster response. Recommendations are also included for donors to increase the effectiveness of funding for disaster response.

2. Scope of the study and methodology

This study's purpose is to add to the existing body of knowledge concerning protection and accountability in disaster response. This study was commissioned to determine how agencies responding to the earthquake addressed protection in their activities and whether these approaches contributed to greater protection of the beneficiaries or indeed increased their vulnerability. Principal questions included:

- How is protection mainstreaming informing programme design and implementation?
- What is the relationship between protection and accountability in practice?
- Has accountability become a proxy for protection work?

To address these questions, a mixed methods approach was used in the study in order to triangulate information from a variety of sources. Between 14 and 29 January 2013, three members of the study team conducted primary research in and around Port-au-Prince. The methods employed included:

(1) Content review and analysis of gray literature including organisational reports, reports of development indicators, case studies and examination of existing programme and management tools. Academic and popular publications were also reviewed.

(2) More than twenty-five semi-structured interviews with key informants including NGO and governmental managers and staff in Port-au-Prince as well as initial briefings and follow-up interviews with London and headquarters staff.

(3) A participatory workshop for DEC members funded in Haiti conducted in Port-au-Prince during the fieldwork phase of the study. The participatory workshop helped to develop the key questions of the investigation including interactive sessions such as the 'river of life' exercise (where small teams creatively depict prior events using a river's flow as a metaphor for what took place). These helped the team understand complex situations that involved issues of power dynamics, gender issues, GBV and other protection concerns.

(4) Focus group discussions with line-staff and beneficiaries, including visits with representatives of DEC-funded partner organisations to Corail and the La Piste area of Port-au-Prince and interviews with individual and small groups of local residents (beneficiaries).

The objective of these four methods was to investigate the type of aid received, protection and accountability concerns, programming gaps and information sharing. These methods targeted groups, organisations and individuals particularly those involved in protection, gender and accountability issues. Participating DEC members were those that responded to the crisis: ActionAid, AgeUK, BRC, CAFOD, CARE – UK, Christian Aid, Concern, Islamic Relief, Merlin, Oxfam, Save the Children, Tearfund, World Vision and Plan UK. At least half of the DEC member representatives who the team met with had been present during the initial earthquake response period, including and up to one year after the earthquake. Of these respondents, at least one third had worked not only during but prior to the earthquake.

To gain an appreciation of the situation beyond the group of DEC members, supplemental qualitative information was also gathered from other organisations. Examples of these included organisations that were active in the Protection Cluster, UN specialized agencies and the Ministry of Social Affairs Institute of Social Welfare and Research.

The study team analysed the information gathered and wrote an initial draft report that was reviewed by independent experts and the DEC. The findings and analysis of this research are blended in this final report.

Scope of the study timeline

2010

- 12 January Earthquake of a magnitude of 7.3 occurs southwest of Port-au-Prince killing an estimated 200,000 and affecting over two million people.
- 14 January DEC launched an appeal to the public for funds, eventually rising over £103 million from the British public.
- 15 January US\$25 million allocated to the UN's Central Emergency Response Fund (CERF); UN Flash Appeal is launched requesting US\$575 million (this was fully funded one month later).
- 18 February Humanitarian Appeal is launched requesting just over US\$1.4 billion in additional funds for emergency activities over twelve months.
- 31 March Donors pledge a total of US\$9.9 billion, of which US\$5.3 billion is pledged over two years (against the requested US\$3.9 million) in support of the Haitian government's Action Plan for National Recovery and Development at the International Donors Conference 'Towards a New Future for Haiti' in New York.
- June/July Forced evictions from IDP camps begin
- 20 October Cholera epidemic outside of Port-au-Prince, killing 3,597, over 340,000 people fall ill
- 5 November Hurricane Tomas kills more than 50 people and leaves 200,000 people homeless
- 28 November Presidential elections usher Michel Joseph Martelly into office (replacing René Préval)

2011

- 14 May Installation of President Michel Joseph Martelly
- 4 August Hurricane Emilie
- 25 August Hurricane Isaac
- 17 August New president launches 16/6 programme to address displacement in Pétionville

2012

- 25 October Hurricane Sandy kills approximately 50 people

2013

- 12 January Three year anniversary of the earthquake
- Jan-Feb DEC Study on Protection and Accountability

3. Context and background

Haiti has a long history of deep socio-economic, environmental and political crises (Girard 2010). Haiti's history of exploitation, dictatorship, dependency and vulnerability goes a long way in explaining how the country's current state of affairs has stubbornly remained in place. Development and humanitarian assistance projects in Haiti date back long before the 2010 earthquake and have often been problematic (Buss 2008, Schuller 2007).

3.1. Haiti before 2010

Despite being the first democracy in the Western hemisphere, amidst poor governance and a lack of rule-of-law, environmental degradation and foreign occupation, Haiti has consistently landed near the bottom of poverty indices for the last fifty years (Farmer 2011, Buss 2008). Standard development indicators remain the lowest in the Western hemisphere. In 2009, Haiti ranked 149 out of 182 countries on the Human Development Index and 97 out of 135 on the Human Poverty Index. Combined with other factors, poor access to basic services such as health and education meant that few development gains were made. The state of a wide range of vulnerable groups such as children and the elderly was particularly acute with high levels of child malnutrition, 72% of the population had no access to health care at all and most schools (85%) were private and thus out of reach for many children (ICG 2009).

Poverty is endemic with a stagnant economy and high unemployment. While traditionally an agricultural-based economy, population growth and the hope for improved economic opportunity have resulted in massive urbanisation of the capital, Port-au-Prince. Among the many problems that arose were vulnerabilities created by expanding slum areas, pervasive gender-based violence (GBV) and the phenomena known as *restavek* (children from poor families sent to live with urban families to work as domestics) (Pierre, Smucker and Tardieu 2009). Poor infrastructure and environmental fragility further exacerbated a lack of sustainable livelihoods while years of political instability had made alternatives, such as tourism and stable export industries are unviable (World Bank 2007). Between 2000-2007, an estimated 72% of the population lived on less than US\$2 per day. In 2008, GDP per capita was US\$729 and ODA per capita was \$92. Prior to 2010, unemployment was estimated at around 30% for the country as a whole (45% in the metropolitan area), 32% for women, and 62% for 15–19-year-olds (PDNA 2010: 17). According to the Inter American Development Bank and the World Bank, the economy is supported by nearly \$1billion sent to the country each year by the Haitian diaspora.¹

In terms of governance and rule-of-law, violent protests and rebellion have been common. The state failed to maintain safety for the populace and at times involved itself with criminal elements (Girard 2010). Instead of fulfilling its social contract with its constituency, 'the Haitian state's use of violence built exclusive protection rackets based on precarious alignments of elite interests, which have exploited the population and stunted economic development' (Pierce 2007: 2). Because the Haitian state has traditionally shared power with extra-judicial groups ('gangs') it has not maintained protection mechanisms afforded to more peaceful societies. These groups took money from community residents 'through coercive taxation, demanding large portions of residents' limited funds, and siphoning local development project money' (ICG 2007: 6). For the ordinary citizen, there has been little recourse to legal justice. While the presence of the UN

¹ <http://www.myhaitioffice.com/USAID.html> and <http://blogs.worldbank.org/peoplemove/helping-haiti-through-migration-and-remittances>

Stabilisation Mission in Haiti (MINUSTAH) starting in 2006 put a lid on outright chaos and civil war, various political spoilers and criminal groups still prevent the flourishing of durable peace and sustainable development.

As a result of these conditions, aid groups working in Haiti have been forced to work either ‘in’, ‘on’ or ‘around’ conflict and often fill in where the state and market mechanisms left gaps. Aid groups worked on a range of issues, mainly in health, education, and economic development concerns. During the two decades prior to 2010, the level of official development assistance (ODA) was variable. More than 70% of available health care was provided by NGOs (ICG 2009). After 2002, ODA rose sharply as a result of a number of disasters (e.g. hurricanes and food riots in 2008) and peacekeeping (Buss 2008, OECD 2009). In this situation, aid generally focused on immediate concerns and did not address the needs of some vulnerable groups or engage in disaster risk reduction (DRR). This was further complicated by a level of dependency existing between the people of Haiti and outside groups which had a profound impact on the aid provided in 2010 and thereafter.

3.2. The earthquake and its aftermath

With a magnitude of 7.3 and the epicentre 15km southwest of the densely populated capital Port-au-Prince, the impact of earthquake of 12 January 2010 was immense. In response, a large number of aid groups rushed in to help and a massive humanitarian response was launched. Later that same year, a cholera epidemic swept the country eventually claiming thousands of lives. By June, the hurricane season commenced bringing violent tropical storms. The country continues to deal with the aftermath of these events. Critics have argued that some involved in providing aid have been and continue to be unaccountable, poorly coordinated, neglected to support the government and other performance poorly in other ways (DAP 2010, Farmer 2005, Kristoff and Panarelli 2010, Schwartz 2011, Van Praag 2011, Zanotti 2010). It is nonetheless clear that NGOs, particularly DEC members and other organisations that follow good practice, play a very important role in saving lives and reducing suffering. In reviewing the years that followed the earthquake, at least five complex and connected themes become evident.

Massive displacement

As a result of the earthquake, an estimated 105,000 houses collapsed whilst various sources have estimated between 70,000 - 200,000 casualties and 1,500,000 people were displaced in the immediate aftermath (Muggah and Kolbe 2011, Schwartz 2011). Immediately following the earthquake, there was displacement in Port-au-Prince and flight out of the capital. Months later, an influx back into the city from the provinces took place where Haitians suffering from severe poverty came in search of assistance, exacerbating the vulnerability of a number of groups, including children and the elderly. In these conditions, thousands of informal settlements (‘camps’) sprang up in and around Port-au-Prince. At the time of this report, there are still 496 camps of which only 23 have fully functioning water services and there are on average 72 people per latrine. According to the UN’s Humanitarian Action Plan (2013: 5), 358,000 internally displaced people (IDP) remain in camps ‘facing deteriorating living conditions and increased vulnerability to protection incidents’.

According to Goldberger (2012), an average of 97% of beneficiaries indicated one of two reasons for moving to a camp: halting of income-generating activities, and loss of housing. For camp residents and their families who either rented (76%), or were supported by their family (9%), and loss of income directly translates to loss of housing. When asked about actions taken

to leave the camp the most frequently cited responses were: 'It's up to God' (39%), 'I'm waiting for the government' (37%) and 'I don't know yet' (35%). A smaller portion shared that they are actively seeking help from organisations, family and friends, or trying to work.

Because of the scope of the displacement and the thorny issue of land ownership in Haiti, massive pressure was put on people to relocate, 'decongest' existing camps or find other durable solutions to their displacement (Gleed 2011, Schuller 2011). This led to forced evictions which peaked in 2011. This issue, however, continues to plague reconstruction and development efforts and will for years to come. More recently, the return of IDPs to communities has also posed problems with forced eviction from the camps and the relocation of camp residents to packed slums with few or no services.

Camps attracted the rural poor who were not receiving direct services because services were concentrated on the populations in Port-au-Prince. In this situation, some groups providing assistance, although well-intentioned, delivered the wrong services to the wrong people. The concentration of basic services in the camps in some cases contributed to vulnerability instead of alleviating it (Schuller 2010). In time, many people were reluctant to leave the camps and risk losing basic services that needed to survive. As a result, there was a proliferation of camps and migration from the provinces throughout 2010.

Managing rapid change

Within the initial hours of the response, the local populations were intervening at the community level without foreign assistance. This occurred at a time when most, if not all, local staff were severely affected by the disaster. The gravity of disaster necessitated several management decisions to be made quickly which entailed unintended consequences as programmes evolved. First, sending in additional staff with experience working in such situations and the addition of new types of programming and a large increase in funding. Due to their sheer size, newly arrived emergency response teams were often housed in offices away from the existing development units of their organisations. This was not reported to be the case, however, with organisations that worked directly through local partners. In these cases, additional resources in both staff and funding were brought to bear by DEC members that had established relationships with local partners prior to the earthquake. While many of the organisations after the earthquake had never worked in Haiti before, only two DEC-funded members were new to the country. Second, it also required laying aside (at least temporarily) long-term development programmes and partnerships and often moved organisations into new sectors such as protection activities that were new in Haiti.

This set of circumstances created issues in guiding all the 'moving parts', challenges orientating new staff and making sure teams were working together. With these organisations came staff that had little knowledge of the local or national context. This led to weakening this tradition and contributed to a situation where there is less confidence in local capacity. This lack of local knowledge and local customs led some international NGOs to the wrong community representatives. According to at least one report, several camp committee members were gang leaders who ransomed and intimidated camp residents.² Traditionally Haitian communities practice what is known as *Konbit*, a kind of solidarity chain through which the communities help each other according to a structure defined by the communities themselves. While Haitian diaspora also returned from around the world to assist, most expatriate responders arrived speaking little French and no Creole. A larger issue, however, was the vastly different technical

² <http://ijdh.org/archives/14900>

Case Study #1: Assessing risks and building teams prior to a disaster results in increased staff cohesion and effectiveness

ActionAid, headquartered in South Africa, has been on the ground in Haiti for over 16 years. Programmes support basic rights and access to basic services for the most vulnerable populations from a 'ground-up' perspective. Within ActionAid's emergency management model it is the responsibility of the country office in the affected region to lead the emergency response, supported by its regional office and the International Emergencies and Conflict team located under the ActionAid International Secretariat. The sudden inflow of funds for the response arrived with concerns around the capacity of ActionAid Haiti to scale up quickly to deliver a timely and effective programme given the relatively small size of the team and its limited experience of responding to large scale disasters. Given the size of the emergency, in addition to the sustainable development model long adopted by ActionAid Haiti within the framework of a 'rights based' approach, discussions were held between the ActionAid Haiti team, the regional office and the International Emergencies and Conflict team on how best to proceed. However it was agreed by the management team, in consultation with the team in Haiti, that it was important to continue with its existing model on the ground to make sure that long standing relationships, which had been built between staff and within the communities where ActionAid had been working were not broken up.

ActionAid decided to augment and strengthen its staff on the ground thus meeting HAP Benchmark #2 (see Section 6.0 below) and circumventing many of the problems other organisations encountered by shifting so heavily to new staff. Expatriate emergency response specialists played an invaluable advisory and management support role. Additional local staff were hired and trained. The organization seconded staff from its Emergency Roster from other programmes around the world so that they were able to hit the ground running with a solid understanding of ActionAid's approaches, policies and procedures.

Working with and building the current team on the ground proved successful. The staff remained motivated, they continued to feel respected and part of a larger organization that understood and valued the contributions there were able to make. Quickly ramping up the existing management structure, rather than shifting management responsibility away from the leaders on the ground prior to the earthquake, ensured continued solidarity and trust between partners, communities and ActionAid staff in Haiti and in other offices in the region and beyond. The ActionAid emergency response team members arrived in Haiti with an understanding of the context because much work had been done prior to the emergency to address risk factors appropriate for short, medium and long-term needs based on a number of possible scenarios—a necessary approach, being that Haiti is often faced with on-going disaster threats.

language spoken by the newly arrived staff (i.e. a language that included notions such as 'protection' and 'accountability' as outlined in this report). As a result of these combined circumstances, communities often now expect to receive assistance and many people are still waiting for assistance from the international community. Organisations involved in long-term programming later struggled to obtain adequate community participation in the reconstruction phase.

Challenges of assessment

Organisations grappled with the new inflow of resources which, for most agencies, were of a magnitude never before seen on the ground. There was a disconnect during the emergency

programme start-up phase in terms of collaboration, which was compounded by the loss of many NGO, UN and Government of Haiti staff as a result of the earthquake (not just from death but also trauma and related departures). Over the course of the response, this led to a situation where there were times with too little information and other times with too much.

Assessments and coordination were considered by many to be weak and inadequate to the enormity of the task at hand. In-depth assessments were not possible in the initial response and follow up information collection was not always done. At least one organisation interviewed cited a lack of donor support as the reason for this. In order to formulate adequate indicators to guide and inform on going, and later, expanded programming, few DEC members conducted initial baseline assessments. Instead of carrying out baseline information gathering, organisations more often carried out 'end line' assessments. Rapid assessments were normally conducted in isolation especially when done by newly arrived NGOs and others that did not have a previous presence on the ground.

Persistent issues with coordination

Coordination of humanitarian activities was often problematic among the wider community involved in the earthquake response. As other research has shown (e.g. Duplat and Perry 2010, Grünwald and Renaudin 2010), there was particularly weak coordination between the humanitarian community, other members of civil society and the Haitian government (this is in part due to the loss of so many civil servants). This resulted in generally weak national and local ownership as well as an inability to maintain elements of sustainability where they were possible. In practical terms, the problems with coordination existed on at least two levels.

First, problems existed in coordinating between local and international actors. This appears to have occurred for a variety of reasons – not only because of the aforementioned challenge of managing the level of change required but because of a complex of differing priorities, timelines and understandings. For instance, many organisations that implemented programmes in camp settings worked with local camp committees. The study team found that these were problematic for a variety of reasons. As other research has shown, camp committees were 'failing to follow up on complaints, being biased and corrupt (mentioned in all but one of the IDP camps visited), or having limited capacity to carry out their duties' (Gleed 2011: 44, Schuller 2010, 2011). The study team also interviewed a government representative who described that in the aftermath of the earthquake, organisations that did not follow standard child protection measures (this study found that all DEC members did) provided support to orphanages while the government's priority was to identify unaccompanied children and do family tracing and reunification. This contributed to the increase in the number of orphanages in Haiti and may have increased the risk of trafficking. In another perspective, working with the government and donors was also identified as an issue. As one person interviewed commented: 'Initially, the ministries were merely a rubber stamp, which made sense after earthquake. We tried to work beyond this stage but they couldn't do it on more recent projects'.

Second, problems existed in coordinating international response agencies. The initial reporting from DEC members noted that almost all of these organisations participated in the Cluster System. The UN Office of the High Commissioner for Human Rights (UNOHCHR) was the protection cluster lead with other organisations taking the lead for specific sub-clusters, such as UNICEF which was responsible for coordinating child protection. At the start of the Cluster System, there were issues with coordinating during the initial response. Frequent changes of UN staff responsible for heading the clusters resulted in fractured coordination as new staff took up their positions, sometimes for mere weeks. In time, some clusters were able to consolidate

and share guidelines and best practices for programme design and implementation, including basic baseline data and situation reports. Compounding these problems, very few of the UN clusters had strong, supportive coordination with the appropriate line ministries. Even the location of Cluster meetings (at the UN's logistical base ('Log Base') located at Port-au-Prince International Airport) was problematic because it did not allow for easy access of international partners and was, in many cases, impossible for local partners to gain access. As such, aid often occurred in isolation – a practice that has yet to be fully reconciled. The transition away from the Cluster System to a new coordination mechanism, currently underway, is expected to take some time.

Additionally, in the immediate aftermath of the earthquake the main language used within the system was English thereby representing an important access barrier for Haitians involved in the relief and recovery effort. Within several weeks coordination meetings began to be conducted in French, representing a modest improvement but this remained an impediment to some local actors. As mentioned above, given the fact that many INGOs were either new to Haiti or had entirely new staff managing the response this complicated matters in terms of coordination, while generating confusion and mistrust on the part of local actors and organizations.

Persistent hazards and durable vulnerability

Since the earthquake, Haiti has experienced a cholera epidemic, hurricanes and persistent food insecurity. With the outbreak of cholera later in the late summer of 2010, an increase in the need for additional funding and programming materialized while organisations were addressing massive and ongoing humanitarian needs in shelter, health and WASH. On the heels of this, Haiti was affected by Hurricane Thomas (in November 2010) at a time when large numbers of the displaced were still living with inadequate shelter. In 2011-2012, at least two hurricanes threatened to unseat any efforts that had been achieved to date. Hurricanes Isaac and later, Sandy, arrived on the shores of Haiti after many emergency personnel and funding streams had left the country, including the decrease in large local staff numbers. As such, relief organisations were facing the onset of these threats with limited resources in terms of staffing and funding.

Case Study #2: Older single woman rebuilding her home on her own

The study team interviewed a woman who was selected at random. She was sitting on the edge of a small piece of land, where she was watching a group of young men building a temporary shelter. The woman informed explained that the young men were her sons, and that they were putting together a temporary shelter as they waited for the reconstruction programme of the organisation working in the area to be launched. She has been homeless since the earthquake. The main issue that this woman was facing was that she had lost all of her important papers during the earthquake, including those acknowledging her property right. Because she could not prove to the organisation that she owned the land, her name was not included on their list of beneficiaries. Although her neighbours testified on her behalf, this was not sufficient. She has to go to court but she did not have the financial means to do so. She has been living in the areas for more than 20 years. She felt safe in this area but thinks that the reconstruction promised by the organisation was taking too long. She did not know why. She was aware of meetings being organized in the area but she was not aware of what information was discussed with the organisation and the representatives from the community.

Over time, attempts have been made to transition from relief to recovery and reconstruction. With the elections in 2011, came an increase in rioting and other forms of violence affecting the population already struck by the earthquake. The new president, Michel Martelly, ushered in an effort to address the massive needs in shelter known as '16/6'. This consisted of the relocation of populations residing in sixteen camps into six communities. This was meant to streamline the focus of organisations that had not been working as collaboratively as intended. Reconstruction efforts were again stymied, however, by the resurgence of cholera which, for a second time, reset the focus of assistance on immediate lifesaving measures. Currently, the estimated number of affected is one million people including 500,000 most vulnerable to food insecurity, 73,440 children under five, 358,000 IDPs and 71,400 victims of Hurricane Sandy, 118,000 potential victims of cholera (Humanitarian Action Plan 2013).

3.2.1 The status of vulnerable groups

Key protection issues were quickly identified by DEC members including high levels of GBV, forced displacement (and land tenure disputes), increased petty and violent crime, violence from gangs, and the separation of children from their families. The Post-Disaster Needs Assessment (PDNA) identified the need to 'Provide protection from and prevention of violence for the most vulnerable groups, through strengthening of the police force and preventive measures and community initiatives' as a 'major area of action' (PDNA 2010: 11).

Many organisations sought to address protection concerns in their response even if they had not previously done protection programming in Haiti. With the collapse of state service provision, large numbers of local and international agencies raced to fill this vacuum, though this in itself posed a number of challenges in terms of coordination, planning and the integration of services. While some specialised in standalone protection programming, many focused on mainstreaming protection into their assistance programmes such as shelter and WASH (see Section 3.3). Attempts were also made to carry out safe programming, ensuring 'Do No Harm' principles were respected, vulnerable beneficiaries targeted and accountability mechanisms implemented. These met with varying degrees of success, although the challenges specific to monitoring and evaluating protection related activities meant that concrete results were at times difficult to ascertain.

Despite the challenges, with time, the activities of many groups assisted those in need and DEC members consistently displayed their value in addressing protection while being accountable. The wider humanitarian community similarly provided substantial assistance as described in the UN's Humanitarian Action Plan (2013: 8):

Protection interventions helped over 7,000 of the most vulnerable including children, survivors of sexual violence and camp populations. Since the earthquake, more than 16,000 separated children were registered to facilitate family tracing. As a result, more than 2,900 separated and unaccompanied minors were reunified with their families. In addition nearly 3,000 vulnerable people were provided with access to legal documentation. Six safe houses for survivors of GBV were set up, providing over 1,000 survivors with medical, psycho-social and legal services, as well as schooling for 200 unaccompanied minor GBV survivors. Efforts were also made to improve the security of women at risk of GBV incidents in camps.

3.2.1.1 Children

Children represent 42% of Haiti's population³ and many live in situations that inhibit their wellbeing and development. One underlying cause of this is the large number of children who do not live in a traditional family environment. There are approximately 350 registered orphanages in the country and about twice as many unregistered and unregulated ones. Before the earthquake, approximately 225,000 children lived in domesticity among which two-thirds were girls (PADF 2009). During the third cycle of basic education, the school dropout rate was higher among girls than among boys; causes for this vary between early pregnancies and economic reasons (PADF 2009). A recent survey by the Institute of Social Welfare and Research (IBESR) indicates that 50,000 children are placed in children's homes, nearly 20,000 are orphans, others are there due to extreme poverty and 47% are girls. According to the 2009 Annual Report of UNICEF, 21% of child domestic workers are between the ages of 5-14 years.

This situation worsened after the 2010 earthquake. A study conducted by UNFPA following the earthquake indicates that three out of 10 teenage girls had at least one child or were pregnant. Another 2012 survey Government of Haitian titled '*Enquete sur la Mortalite, la Morbilite et l'utilisation des Services*' indicates that the most numerous cases of teenage pregnancy are observed in very disadvantaged areas where girls are more likely to be used by sex traffickers. The number of separated and unprotected children also rose significantly. According to the PDNA (2010: 39), 'in the wake of the earthquake 103,000 cases of children without any family protection have been recorded'. Currently, there are '81,600 children under five are acutely malnourished; 20,000 of these suffer severe acute malnutrition and are nine times more likely to die than healthy children' (Humanitarian Action Plan 2013: 5).

3.2.1.2 Women

Women play a vital role in various aspects of Haitian society. The Ministry of Women's Affairs is mandated to address issues such as violence against women and other forms of harassment, but resources for programmes are sorely lacking and the earthquake decimated the Ministry of Women's Affairs itself further weakening its ability to fulfil its role. Three years later, the current Minister of Women's Affairs, Marie Yanick Mézile, is working to intensify efforts to enable girls and women to enjoy the same rights and privileges as men. At the national level, the question of women's quota in the government was introduced in a constitutional amendment on 9 May 2011. The Parliament voted to ensure a quota of 30% women in positions of power in Haiti. Haiti had one female Prime Minister in 2008-2009, who worked to adopt a more robust agenda

Case Study #3: World Vision reached out to the disabled to ensure that under supported vulnerable populations receive aid

Targeting vulnerable groups as beneficiaries of Cash for Work (CFW) activities proved difficult with regard to people with disabilities. Initially, recruitment efforts were being made in every camp by World Vision. When recruitment of people with disabilities proved to be too difficult, the organisation's Health Sector unit intervened and assessed the location of disabled persons within camps where it was working. It became clear that the small number of disabled persons in camps were actually concentrated in only three of the thirty-five camps where the organisation was working. Therefore, plans were laid to do systematic recruiting of people with disabilities when World Vision conducted activities in those camps.

³ http://www.ihsi.ht/pdf/projection/DOC_POPTLE18_MENEST2012.pdf

to address issues facing women. Since 2005, the numbers of women in senior level positions in the government have been growing steadily. For the first time in Haiti's history, women represent 40% of the government although they remain 52% of the total population.

Within civil society, the earthquake shattered a burgeoning women's movement in Haiti. Three of Haiti's most prominent women, Myriam Merlet, Magalie Marcelin and Anne Marie Coriolan, the founders of three of Haiti's leading women's rights organizations, died in the rubble. This reality notwithstanding, some perceptions hold that Haitian women are passive and helpless victims of violence yet this is inaccurate. As noted by the USIP (2012), this portrayal not only ignores the efforts of Haitian women in post-quake Haiti but neglects their steadfast travails since the fall of the Duvalier dictatorship in 1986 to work against violence and toward building a more just and inclusive society. The same report notes that over the past 25 years, women have formed organizations, spoken out, demonstrated for their rights, voted in elections and sought redress against perpetrators of GBV by telling their stories to a Truth Commission in 1997. Despite this, many local NGOs are now working to address women's rights including mounting international advocacy campaigns with recommended actions to address GBV.

At the community level, women and girls in post-earthquake Haiti were found to face additional hardships in Port-au-Prince (Human Rights Watch 2011). In addition to sexual violence, these included a lack of access to family planning, prenatal and obstetric care and a need to exchange sex to buy food for themselves and their children. The crisis is reflected in pregnancy rates in displaced person camps that are three times higher than in urban areas before the earthquake and rates of maternal mortality that rank among the world's worst. The issue of GBV is still as prevalent but coordinated efforts and increased visibility are shedding light on the issue. Yet assistance programmes are not enough to address the scale of the situation. Indeed, as the Humanitarian Action Plan has noted, 'although a number of camps have been dismantled, the numbers of GBV and protection cases have increased' (2013: 18). Today, local women's organizations are rebuilding their capacity. .

3.2.1.3 People with disabilities

Before the earthquake, information regarding the extent of rehabilitation needs in Haiti was inadequate and services to meet them were not provided by the state. According the Secretary of State for the Integration of People with Disability in the National Policy on Disability published in September 2009, only 3% of people with special needs had access to health services, education and rehabilitation across the country. Approximately 800,000 Haitians (10% of the population), lived with a disability and this figure increased by an additional 4,000 people

Case Study #4: Engagement and participation of local actors are essential for a relevant and effective response

Early and ongoing consultation between Concern and community groups (resident camp committees) throughout distribution of non-food items (NFIs) proved to be an important factor in influencing better outcomes. Concern staff and committee members contributed their local knowledge and capacities. This helped to address and forewarn about security issues. Additionally, public consultation, an important element of local governance, was especially critical in carrying out Concern WASH activities. Collaboration with DINEPA (*Direction Nationale de l'Eau Potable et Assainissement*), the national water authority through the WASH Cluster ensured public ownership of the long-term recovery plan and helped to anticipate and raise critical issues before decisions were made.

suffering amputations as a result of the earthquake (National Policy on Disability 2009). The question of taking into account the rights and needs of disabled people was addressed after the earthquake of January 2010 and with the arrival of many international experts. Children and youth themselves acknowledged the exclusion of people living with disability: 'Everyone must know that in the new Haiti...above all, we must integrate disabled people according to their abilities to contribute to the new Haiti. We need the strength of the whole nation to make the new Haiti possible' (UNICEF and Plan International 2010).

3.2.1.4 Elderly

As with other vulnerable groups, the needs of the elderly were inadequately addressed before 2010. With reference to resolution 65/182 of the General Assembly of the United Nations, the Office of the Ombudsman (*Office de Protection du Citoyen*) dated 2011, conducted a survey on the situation of the elderly in Haiti. The survey revealed that at the state level, there is no legal framework, clearly defined, ensuring the protection of senior citizens. The earthquake worsened this situation by, among other things, disrupting or removing traditional social support mechanisms that helped to look after the wellbeing of the elderly. According to AgeUK, over 200,000 older people were affected by the 2010 earthquake and approximately 70% of this groups reported not receiving any aid. In an evaluation of AgeUK's work in Haiti conducted by DEC, 50% of older people surveyed spent nearly two days without eating.⁴ As a result of the earthquake and the lack of support mechanisms, such as pensions, older people widely feel abandoned and socially excluded.

3.3. The response by DEC members

All but two of the DEC-funded members were present in Haiti prior to the earthquake. On 14 January the DEC launched an appeal to the public for funds, raising over £103 million. A third (33%) of these funds was raised by the member agencies themselves, the remainder by the DEC. At the time, all thirteen DEC members participated in the response. All funds have now been allocated and programmes were completed three years after the earthquake, at the end of January 2013.

The DEC-funded members included ActionAid, AgeUK, BRC, CAFOD, CARE Int UK, Christian Aid, Concern, Merlin, Oxfam, Save the Children, Tearfund, and World Vision. Plan UK joined the DEC in 2011, responding to the crisis but not with DEC funds. Generally, there were two approaches by DEC-funded members as it relates to designing protection activities into disaster response programmes: 1) standalone protection programmes (i.e. specialized activities targeting specific vulnerable groups); and 2) a combination of both standalone and mainstreaming of protection programmes (discussed in Section 5.0).

How organisations approached the inclusion of protection into their disaster response programmes was often a result of a phased approach (outlined later in this section). The ten DEC members present in Haiti prior to the earthquake had well established staffing and management structures. In almost all cases, programming approaches for these organisations were focused on long-term development. Organisations worked in a variety of sector areas including health, education, livelihoods, and WASH. Many of these organisations carried out capacity building and technical assistance activities with local partners.

⁴ <http://www.AgeUK.org/newsroom/latest-news/haiti-earthquake-two-years-on-discrimination-against-older-people-is-rife/>

DEC funded organizations (2010-2012)		
	Main activities	Location
Action Aid	Education, livelihoods & food security, WASH (and irrigation), Shelter, DRR	Mariani, Philipeaux, St. Jude, Gressier and Petit Goave (Vallue)
Age UK	Health, protection and livelihoods	Port-au-Prince (Delmas and Tabarre), Croix des Bouquets, Leogane
BRC (British Red Cross)	Health, livelihoods, DRR and cholera mitigation	Port-au-Prince: Two Camps (La Piste and Automeca) and Delmas 19
CAFOD	Shelter (CRS and BC), WASH (CRS), capacity building	Port-au-Prince and Jacmel
CARE	Shelter/NFIs	Tisous
Christian Aid	WASH, Livelihoods, DRR, WASH	Northeast, Southeast, West, Central and Les Nippes Departments
Concern	WASH, capacity-building and technical support	
Merlin	Health: primary health care and maternal/child health and preventative medicine	Port-au-Prince (Canaan IDP camp) Bi-weekly mobile clinics at Jerusalem and Onaville MSPP health care centre of Basboen. Petit Goave
Oxfam	WASH, livelihood and protection	Carrefour Feuilles and Croix des Bouquets
SC-UK	Livelihoods and WASH	Port-au-Prince
Tearfund	DRR and Health (HIV/AIDS)	Leogane
World Vision	Shelter/return, livelihoods (training) and health	Port-au-Prince: Cite Soliel and Corail

A number of organisations worked through local community based organisations and partners. Before the earthquake, organisations working through partners often supported activities for specific vulnerable groups. For example, Christian Aid has long experience working with local community based organisations in Haiti. One of local partners supported focused on women, while another supports the needs of refugees along the border area. Although both partners used protection principles in their work, they only designed programmes to address the needs of specific vulnerable groups. In cases where organisations were working in multiple sectors, unless they had a specific focus on a vulnerable group, such as children, protection was more likely to be mainstreamed into their development programmes.

Protection programming immediately following the disaster

In the immediate aftermath of the earthquake, as noted above, organisations scrambled to address the most pressing of basic needs. The sheer volume of needs of the populations made this a massive and challenging task. This included the need for basic sectors including health, food and non-food items, as well as shelter. As the entire population in the affected areas was in need, many organisations moved to support life saving and life sustaining measures without designing standalone programmes. Exceptions to this case included separated children, the elderly and the disabled when organisations had a clear focus on these groups as part of their overall missions. Organisations that implemented humanitarian programmes based on a single vulnerable group mandate also tended to design standalone programmes for these groups within their overall disaster response.

Protection programming after the initial response

After the initial three months of the response, there was an increased focus on programming that addressed vulnerability more widely. This happened as organisations began to stabilize their staffing and management structures. As organisations increased participation with beneficiaries, an effort to involve associations, advisory groups and networks of volunteers tasked with identifying the most vulnerable in their communities tended to facilitate further standalone protection programming. One example of this is the following excerpt from the final report by Action Aid Haiti (AAH) for the first phase of DEC funding. This shows both a community-based approach that takes time to establish and an increased focus was put on standalone protection activities in the early months of the disaster response:

Community-based protection mechanisms in the camps...served as safe centres and provided children and women psychosocial care, play therapy, and learning activities. Additional mechanisms included distribution of GBV prevention leaflets, training of volunteers to disseminate key messages in the camps, and the creation of neighbourhood watch patrol in camps. AAH trained 37 volunteers and staff to carry out psychosocial services and provided active listening spaces for rights-holders.

Protection programming six months following the disaster

After the initial six months, as organisations began to draw lessons learned from their initial responses and as their overall programmes matured into transitional recovery and reconstruction programming, protection mainstreaming increased across sectors. If issues arose in relation to specific vulnerable groups, organisations tended to revert to standalone

Case Study #5: Women affected by rape and domestic violence turn to young mother for support in Corail camp

'In the beginning, when I first arrived in the camp, people were living in better conditions,' says a young mother and trained nurse living in Corail camp. She adds, 'There was more solidarity amongst the families, more collaboration among community members.' Now families are faced with solving their own problems, she adds. There is little sense of community, now that the families have been left on their own. The environment felt safer when more international organizations were present on a daily basis in the field. Representatives of these organizations organized regular meetings with the community and they could voice their concerns, which were taken into account or at least they felt they were given the opportunity to speak. The situation has changed drastically. Beneficiaries rarely see representatives from the larger international community, and if they visit, they do not organize meetings with a broad representation of the families living in Corail. Rather, meetings are restricted to a small group of people who are invited to attend these meetings. There is a feeling of abandonment in the camp. As she is a nurse, many women who have been wounded after having been beaten come to her home requesting medical attention. She provides these services unofficially to these women who believe that they have no options and who are afraid to report these abuses. There is not adequate access to health services in Corail. During the emergency response, many organisations held meetings and put complaint mechanisms in place. Following the end of disaster response funding streams, in the case of Corail camp, beneficiaries no longer have information or access to resources or ongoing support. Few organisations built community based involvement or management elements into the implementation of information sharing approaches or complaint mechanisms.

programmes to address the gap in services. Actions were taken to ensure that the organisations were not knowingly increasing the level of vulnerability once issues came to the attention of the programme managers (see Case Study #6). From this point, organisations continued transiting activities through to the resumption of development programming.

4. Definitions and perspectives

4.1. Protection

Defining protection as an element of disaster response programming is not as straightforward as it might appear. This is important for this study because of the difficulty in appreciating its relationship with accountability when the concept itself is unclear and understood in different ways. Situations which arise that lead to protection include, but are not limited to deliberate killing, wounding, displacement, destitution and disappearance, sexual violence and rape, torture and inhuman or degrading treatment, dispossession of assets by theft and destruction, misappropriation of land and violations of land rights, forced or accidental family separation, acute thirst and hunger, disease and reproductive health crises caused by the deliberate restricted access or destruction of services, the denial of livelihoods and other restrictions on rights (Slim and Bonwick 2005). These situations of compromised protection can happen at any time but are exacerbated during disasters regardless of their causes or origins.

Protection can be understood as existing on at least four levels: 1) as a fundamental right; 2) as a cross-cutting theme; 3) as an activity; and 4) as a policy. Differences arise from the source of the definition and whether those sources are perceived from either a policy or an operational perspective. This in turn determines whether the understanding of protection has a focus on rights or a focus on wellbeing. While a nuanced difference, this has influence on how assistance is organized, designed, funded and delivered during disaster response programmes.

As a right and a fundamental principle, protection is seen as safeguarding people from physical and mental abuse, violence, and exploitation. This can work on several levels such as preventing harm from violence to measures aimed at reducing structural violence. Seen this way, protection is at the core of humanitarian action which is meant to 'to protect life and health and to ensure respect for the human being' (Pictet 1979: 18). As such, ICRC defines protection this way: 'the effort to protect the fundamental wellbeing of individuals caught up in certain conflicts or "man-made" emergencies' (ICRC).

From this understanding the of activities protection as a cross-cutting theme can be traced. These activities include but are not exclusively or traditionally viewed as relief-based activities such as child friendly spaces, most activities that address GBV and case management of vulnerable individuals. For some, protection mainstreaming also has a close link to the 'Do No Harm' (DNH) approach first popularized by Mary Anderson in her 1999 book by the same title.

Haiti's recent protection legislation:

- The 2001 law prohibiting corporal punishment against children
- The 2005 decree eliminating sexual discrimination against women
- The 2003 law on the prohibition and elimination of all forms of abuse, violence, abuse or inhumane treatment against children

Haiti has also ratified the following international conventions:

- UN Convention on the Rights of the Child
- The Palermo Convention on Transnational Organized Crime and its three Protocols
- Convention 138 and 182 of the International Labour Organization

When understood as a cross-cutting theme, protection may not be implemented as a separate set of activities but is instead seen as integral to assistance in each sectoral area. Following the Cluster System, silos have been created around these sectors which have proven to be a challenge at coordination and integration. At the same time, protection concerns that are (or should be) present in more than one sector can result in a lack of focus on key areas that cut across individual clusters. In addition to protection, other examples of cross-cutting themes can include gender, disability, disaster risk reduction, capacity building and advocacy.

Definitions that tend toward the policy area focus on a legalist approach. The right to protection is enshrined in various international treaties and conventions that constitute International Humanitarian Law (IHL), Geneva Conventions and their Annexes, International Human Rights Law (IHRL) such as the Convention of the Rights of the Child (CRC), the Convention on the Rights of Persons with Disabilities (CRPD), and the Convention on the Elimination of all forms of Discriminations Against Women (CEDAW) derived from more general principles such as that of humanity found in the UN Charter and reaffirmed by the United Nations in General Assembly Resolution 46/182 of 1991. These recognize that ‘all people have certain fundamental and ‘non-derogable’ rights that must be protected at all times – even in conditions of war, disaster and emergency’ (Slim and Bowick 2005:34). These include the right to life, the right to legal personality and due process of law, the prohibition of torture, slavery and degrading or inhuman treatment or punishment and the right to freedom of religion, thought and conscience.

With respect to forced displacement, refugee law (and the UN’s 1998 Guiding Principles on Internal Displacement) recognizes that people who may be denied asylum can be afforded protection in another country. For the UK government, people are entitled to ‘humanitarian protection’ when they cannot return to their native country because ‘they face a serious risk to life or person from one or more of the following reasons: death penalty, unlawful killing, torture, inhuman, degrading treatment or punishment’.⁵ In this understanding, the locus of the state is important as this is where primary responsibility for protection rests. For some, there remains an activity-based component of this understanding of protection. According to Giossi Caverzasio (2001), protection is made up of ‘all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and spirit of the relevant bodies of international law (i.e. human rights law, international humanitarian law and refugee law)’.

These activities may include but are not limited to the identification, reporting and advocacy against human rights abuses through actions such as prison visits. The notion of ‘protection by presence’, where the location of aid workers and others (e.g. peacekeepers and journalists) who may ‘bear witness’ provides a measure of protection and deterrence for vulnerable or threatened people. This can also play a worthwhile protective role in some situations. In these existing definitions, protection is seen as being made up of a number of elements such as dignity, integrity and security as well as reducing vulnerability through the meeting of basic needs through a range of activities. Interestingly, the notion of accountability is not included in definitions of protection (except with impetus to hold governments and individuals to be held accountable for their actions in compromising the protection of others). In the scope of this study, no published definitions that included ‘accountability’ were found (see Section 7.2 for further discussion).

⁵ <http://newmigrant.wordpress.com/2008/04/17/glossary-of-uk-immigration/>

4.2 Applications of definitions in practice

In terms of practice currently underway in Haiti, the understanding of protection tended toward the pragmatic and practical and often blended the common definitions (described in Section 4.1). According to one senior DEC staff member working in Port-au-Prince, protection is:

work done with vulnerable groups to keep them from being harmed because of their vulnerable nature....[it is] things added to a programme.

To a member of another organisation, protection is:

bringing dignity, security, promoting participation, capacity-building and reporting while providing services.

Yet another staff member from a different organisation said:

protection is a way of working. It's how you design, implement and evaluate a project. It's about not putting anyone at risk and making sure you don't reinforce any risks. It's helping to cope and mitigate. Sometimes we have specific activities but not always.

In the Port-au-Prince DEC member workshop facilitated by the study team, key elements of protection were defined as follows:

- Prevention of abuse and violence
- Support to vulnerable groups
- Respect of rights and laws including international conventions
- Ensuring a safe and secure environment
- Providing voice to beneficiaries and partners including advocacy
- Facilitating and supporting access to services and resources

Following discussion of the key points of protection, a working definition was developed by the workshop participants. Protection is:

Preventing abuses and violence against vulnerable people and ensuring the respect of their rights, in order for them to live in a safe and secure environment, through providing voice to the beneficiaries and partners and facilitate their access to services and resources.

5.0 Protection mainstreaming in disaster response programming

Mainstreaming of protection into emergency response programming is done by the integration of rights, security, dignity, safety and access of vulnerable groups to programme inputs and resources. This includes activities within and throughout all sectors. In practice, different organisations prioritize which vulnerable groups they work with based on the nature and focus of their overall organisational mission. There was common agreement by DEC members about which vulnerable groups were incorporated into activities. Protection programming was seen as a fundamental issue and as such effort was made by DEC members to incorporate elements of protection into consideration when launching assistance programmes.

Case Study #6: How Oxfam's monitoring addresses gaps in mainstreaming protection

An innovative approach to address risk management in overall programming is being developed by Oxfam. The basic elements of risk management, which have been defined and incorporated into guidelines, allow managers and staff across sectors to mainstream risk management. This way this is done is similar to their approach to protection mainstreaming. Tools to encourage and promote sector managers 'to think outside of the box' during programme design ensure that programmes are able to withstand a multitude of risks present in Haiti. After the earthquake, Oxfam protection mainstreaming across sectors ensured that vulnerable groups were assisted through food security and WASH programmes. Oxfam identified the potential for an imbalance of programming emphasis as a result of some interventions and adjusted their approach. In the case of cash grants, when identifying vulnerable groups for assistance, Oxfam later discovered that several men put additional women and children forward as vulnerable beneficiaries. Once the cash was disbursed, the men visited the beneficiary and demanded a percentage or cut. Through consistent monitoring, this issue was brought to Oxfam management for corrective action. As a result, the organisation created a standalone protection programme to reinforce the needs of women and children and to fill in gaps that were left unaddressed during protection mainstreaming.

During the study, two main challenges were raised while discussing protection mainstreaming. The first challenge was the initial difficulty in mainstreaming activities. This came about for several reasons. During the initial weeks of the response, as organisations coordinated inputs and designed programmes, it was not always possible to review objectives and project management tools (e.g. Logframes). Organisations that had robust, well-funded and well-trained emergency teams – which in some cases included well developed programme development tool – were better prepared to hit the ground running. This was further helped when if the organization had prior experience working in Haiti. Yet, due to the massive losses that any organisations on the ground suffered as a result of the earthquake, both within agencies and among partners on the ground also suffered severely. At least several of the organisations have developed tools and good practices to address and include protection, accountability and monitoring and evaluation (M&E) during disaster response programming. Although many of the organisations met by the study team may have been aware of these resources, none noted this in interviews or during the workshop when asked about what resources had informed their initial responses.

The second challenge in relation to protection mainstreaming concerned the ability to adequately address protection issues once a number of protection elements have been mainstreamed. DEC members noted that there are critical periods in disaster response where the key elements of protection had been incorporated into disaster programme design. Examples included child tracing and the provision of child friendly spaces immediately after the earthquake. Yet, in some cases, due to the practical constraints, although protection elements were considered and included vulnerable beneficiaries were not fully protected due to fraudulent claims by members of the population who used vulnerable people to access resources and services intended solely for the vulnerable populations (see, e.g., Case Study #1). In some cases, because of the practice of mainstreaming, not enough attention was placed on ensuring needs were met for specific vulnerable groups. For example, one DEC member included protection mainstreaming to ensure that vulnerable groups were assisted in their food security and WASH programmes. As a result, this organisation found that the focus of programming was imbalanced as a result of their interventions as shown in the Case Study #6.

DEC members that worked through local organisations, such as Action Aid and Christian Aid, noted that the bulk of their partners mainstreamed elements of protection. In other words, the mission and focal area of the local partner would dictate which elements, and which specific vulnerable groups, would be incorporated into the design of their programmes. However, some organisations also mentioned that while mainstreaming is important to guarantee protection throughout the response, specialized protection programmes may be also needed to address specific cases and gaps. Many of the established local partners had been working in Haiti with DEC members prior to the earthquake. In these cases, there was an ongoing relationship that included capacity building. Through these relationships, DEC members were able to continue to reinforce protection mainstreaming as they moved from emergency response to long-term local programming with their local implementing partners.

When mainstreaming has been used extensively, the importance of ensuring that emergency programmes have adequate prevention and referral mechanisms was highlighted by DEC members. When protection is not fully integrated (i.e. if there is not strong coordination and collaboration among NGO and government stakeholders and service providers) protection activities related to referral services were not adequately incorporated into programmes. In cases where organisation focused on compliance, and if referral services were not included in programming, it was possible that programmes inadvertently increased vulnerability and may prevent NGOs from providing services to the most vulnerable (see Case Study #2).

6.0 Accountability

6.1 Shared language of accountability

The DEC members shared a common understanding of accountability. All DEC members participate in the HAP. In individual interviews, staff members were aware of the HAP Standards, which had influenced their approach to the design of their disaster response programmes. According to HAP, accountability is defined as:

The means by which power is used responsibly.

HAP is made up of six benchmarks. In the study workshop, these benchmarks were reviewed, including 1) Establishing and delivering on commitments; 2) Staff competency; 3) Sharing information; 4) Participation; 5) Handling complaints; and 6) Learning and continual improvement.

When DEC members were asked to reflect and provide the definition of accountability that they used in their work, a set of three statements were created. The results highlight the shared language understood and used in practice by DEC member organisations. Accountability is:

- Responsibility to ensure involvement with each other, including beneficiaries, donors, staff, partners, local authorities and local organisations, including reference to the way we work with each of these groups. *This language was used by 9 out of 11 respondents to define accountability.*
- Transparency with stakeholders, beneficiaries and partners, including references to doing what the organisation said that they would do. *This language was used by 9 out of 11 respondents to define accountability.*
- Informing and involving beneficiaries and stakeholders. *This language was used by 11 out of 11 respondents to define accountability.*

Case Study #7: Christian Aid works through local community-based partners

Based on their work in Haiti prior to the earthquake, Christian Aid partners were active in lobbying for greater respect of the rule of law, preventing GBV and promoting the respect of the rights of migrants. Christian Aid partner's developed protection programmes that respect the 1987 Constitution (amended in June 2012). Christian Aid partners collaborate with the Office of Protection, as mandated by the Constitution. GARR (*Groupement d'appui aux rapatriés et réfugiés*), one of Christian Aid's key local partners, worked closely with the Office of the Protection of Citizens on training and sensitization of protection issues prior to the earthquake. Participatory tools developed by Canadian-based organisation, Equitas, informed protection work of several human rights organizations in Haiti including GARR and RNDDH. These groups use their training manual in teaching protection issues. In partnership with Church World Service, Christian Aid used protection guidelines that had prior to the earthquake. Well defined approaches to incorporating M&E as well as the use of assessment and mapping tools, and tip sheets informed the development of protection programming and advocacy strategies, which are all integrated into Christian Aid's ongoing programming with partners. These approaches were expanded into emergency programming as Christian Aid worked to further build upon the existing capacity of their long-term community-based partners.

For the purposes of this study, DEC members widened the definition of accountability:

Accountability is the means by which power is used responsibly to involve beneficiaries and stakeholders; ensure transparency; and take responsibility for our programmes.

There was often, but not always, a shared understanding of the HAP definition and benchmarks in theory, as highlighted in some of the examples throughout the report (see case studies #5 and #8).

6.2 Organisational challenges incorporating HAP principles into protection programmes

While there was a shared language of accountability, there were also organisational challenges when incorporating HAP principles and benchmarks in practice. The following is a summary of the collective responses related to these challenges. Immediately following the 2010 earthquake, there were a number of external constraints that served as restraints to organisations committed to fully implementing HAP benchmarks. Specifically, DEC members noted issues with four (4) of the benchmarks including:

- (1) **Inadequate collaboration and coordination (as related to HAP Benchmark #3: Sharing information).** As noted in Section 3.2.1, there was a lack of collaboration and coordination not only within organisations but between organisations and among government ministries, UN agencies and local partners. As evidenced by DEC member reports from the first phase of DEC funding, partners participated in the Custer System while only one member reported that during this first phase reached out to coordinate with technical ministries. A possible reason for the lack of coordination can be traced to the lack of coordination within individual organisations. Section 3.1 noted that emergency response teams often arrived and assumed responsibility for management but did so with little contextual understanding.

- (2) **In addition to robust consultation with beneficiaries, there is a need to increase consultation with local partners and local long-term staff (as related to HAP Benchmark #4: Participation).** Several DEC staff members described inadequate internal procedures to ensure that local partners and local staff were consulted during the development of emergency programme objectives and indicators. Although an organisation may have been working in Haiti prior to the emergency, this did not guarantee that protection issues were incorporated into programming because background, context and inputs from previous partnerships were at times put aside by newly arrived staff (as noted in Section 3.2). In the initial phase, efforts were compounded by the massive loss of life by organisations that had been operational in Haiti prior to the earthquake.

The study team found that basic participation and information sharing strategies in place including complaints mechanisms. However many interviewed could not explain how these strategies and mechanisms were reaching the most vulnerable community members. In many cases, relationships were built with individuals within a community and it was assumed that these individuals, in turn, reached out to the community. For example, organisations could cite that community meetings were held but few discussed how their community representatives informed the wider affected community (see Case Study #8). Interviews with beneficiaries revealed that the people who ostensibly represented the community and had the responsibility to convey message to the NGOs are not performing these responsibilities to the extent expected. On site visits, the study team looked for bulletin boards and other instances of community outreach by representatives to share information or request input from their neighbours but were unable to identify if this were done. Due to illiteracy, verbal outreach by community representatives working directly with the organisations was conducted but this did not appear to be a consistent approach among DEC members and their community partners.

- (3) **Challenge to ensure follow-up in handling of complaints (as related to HAP Benchmark #5: Handling of complaints).** Almost all the partners interviewed reported having mechanisms to ensure that complaints and feedback are possible with programme beneficiaries. The CRMs included suggestion boxes, cell phone hotline (via both voice and SMS text messages) and community meetings (see Case Study #9 for an example of good practice). Some, however, expressed their concerns about the accessibility of these mechanisms to the most vulnerable. Others raised the issue of a lack of follow up after complaints were made. In at least one instance, people were at first 'afraid' to use the suggestion box put in place by a DEC member. People 'wanted to make a test to see if we really responded. It took almost two months before we got anything. We got the first letter which was actually a "thank you" note which we acknowledged and then told people we wanted suggestions for improvement. We later created an "incident form" but it took training for staff to use that correctly'. The study revealed that in some cases NGOs had no mechanism to ensure that they are receiving the right feedback from the most vulnerable people. As it pertains to complaint mechanism management, organisations need not only put a complaint mechanism in place but also ensure follow up and analysis of complaints. This helps ensure that activities are not increasing the vulnerability of populations, particularly as emergency funding decreases and organisations shift priorities to longer term programming.

Most mechanisms were incorporated into the structure of international organisations to take into account the requirement of donors on a project basis. When funding cycles ended, these structures no longer existed because of the inability to build community-based mechanisms. Migration and population movements in and out of, or even between communities, complicated accountability processes because the sustainability of structures were not guaranteed to endure the project time frame. Social and cultural norms need to be well understood to design effective complaints mechanisms particularly for complex disaster settings. Furthermore, for such mechanism to work, people must first be aware of their rights and know when those rights have been violated. Therefore, awareness raising activities and education on rights are also necessary to protection work.

- (4) **Limited baseline data (as related to HAP Benchmark #6: Learning and continual improvement)**. Although rapid assessments were often carried out, the types of data collected was generally quantitative in scope (e.g. numbers of displaced and locations of displaced populations). As the Cluster System was not fully operationally in the early stages of the disaster response, little information was shared between organisations responding to immediate needs on the ground. DEC partners such as CARE and Tearfund, noted that programme design indicators from their organisational M&E systems were incorporated into the logframes of emergency programmes to guide staff and allow for ongoing, midterm and final M&E elements. The related challenge was the difficulty in analyzing data collected during the initial months following the earthquake to make sense of it and present it in a meaningful way. As mentioned in Section 3.2, organisations dealt with this by doing rapid and 'end line' assessments.

6.3 A note on the use of Sphere Standards in Haiti

A desk review of the initial DEC-funded member reports revealed that while there were challenges in ensuring that HAP Standards were fully employed during the early stages of the response, members also noted that Sphere Standards were considered and implemented as a part of emergency response and follow-on programming. Although there were problems meeting Sphere's suggested standards, such as WASH and shelter, those interviewed did not cite challenges implementing the standards themselves.

A clear understanding and commitment to ensure that Sphere Standards were respected was evident in both member reports and in interviews on the ground. From this evidence, it was clear that Sphere Standards are well embedded in the approaches used by DEC members.

Case Study #8: Men express a need to find ways to expand and broaden information that is discussed with select members of the community.

Discussions were held with a group of men in a community heavily affected by the earthquake. They described a lack of information between the organisation working in the community and the larger population. They noted that meetings were organized by a small and restricted group of people who claimed to represent the community however these people did not communicate the discussions they had with the organisation. The men said that they were happy with the organisation's work but they felt that decisions were not being taken in consultation with the wider community.

Lessons learned in terms of the communications, outreach and training used to engage organisations that provide assistance following disasters has the potential to inform efforts to streamline and align the various standards under review by the Joint Standards Initiative.

7. Accountability and its relationship with protection in practice

An important outcome of the study went beyond the shared understanding of the HAP definition and benchmarks of accountability in theory, to what it meant in practice. Although there were a variety of understandings, the relationship between the two concepts tended to be pragmatic and practical once again. DEC members noted that the overriding principles as outlined by the benchmarks of the organisational accountability frameworks were not always able to be respected in practice, particularly in the early stages of the disaster response. For example, according to the staff of DEC member, the two are 'complimentary'. In discussing HAP benchmarks, one senior staff member commented 'protection overlaps with these benchmarks'. One senior staff member explained that:

We don't make a clear difference between protection and accountability' in practice.

Another staff member explained it this way:

We see accountability as a day-to-day activity...[it] is the first step to protection.

Yet another staff member saw it this way:

I have usually thought about them together. Accountability is a requirement that has to be put in all programmes....There is a benefit to using accountability principles in protection such as when beneficiaries know about what's available, instead of just hearing about it from leaders, then they benefit...When they know about rights, they benefit and are protected.

In an effort to capture the current understanding and practice on the ground in Haiti, the following two sections discuss the similarities and differences between protection and accountability. This is followed by reflection of this relationship in practice.

7.1 Similarities between protection and accountability

The field study revealed four similarities between protection and accountability. First, they can be generally seen as being guided by a rights-based approach that are intended to promote the rights of the beneficiaries. As mentioned in Section 4.1, vulnerable groups that are addressed in protection activities are included under international conventions which provide guidance in the form of principles and approaches used when working with children and the disabled. As a result, some groups are more prominent during programme design and delivery allowing staff to be aware and better trained on the issues of these vulnerable groups more than others. This is based on an organisation's mandate and has an influence on which vulnerable groups are included in an organisation's activities.

Second, transparency is a key principle of both protection and accountability and is an integrated component in programming in general. Both protection and accountability foster and promote feedback and sharing of information between an organisation and its beneficiaries. In this way, transparency is an enabler of accountability and improves protection. Through transparency, organisations in turn give voice to the beneficiaries.

Case Study #9: Managing complaints by looping back to communities fosters increased trust among beneficiaries

Oxfam GB held bi-weekly accountability meetings to discuss response plans with partners and local authorities in Carrefour Feuilles and Carrefour. These were open-door meetings for community-based organizations, local authorities and leaders and Oxfam partners. At the meetings, Oxfam staff led discussions of their plans, constraints, difficulties and successes. The meetings also provided a space for attendees to voice concerns and complaints. Initially some of the main critics of the intervention were not included in the meetings, as they lived or operated in areas just outside the formal project zone but they later began to participate as part of monitoring committees. Oxfam paid special attention to publicising response plans as a means to be accountable to beneficiaries. This was done by using different channels of communication in order to reach a cross section of the population.

Third, both have a focus on vulnerability. In the case of protection, vulnerable groups are a key focus of activities during disaster response. In the case of accountability, by employing participation, information sharing and complaint mechanisms in programme design and implementation, organisations strengthen their ability to ensure that vulnerable groups are given voice and are heard. Both protection and accountability ensure that the most vulnerable populations are addressed.

Finally, both protection and accountability facilitate access to services and resources. Disasters heighten existing vulnerabilities and create new one which can be a challenge to identify and address in complex and dynamic contexts. Because protection activities ensure that vulnerable groups are identified and activities that address humanitarian needs are built into the programmes during the emergency response, a larger percentage of the population with special needs can be reached. As noted above, having effective complaints mechanisms can ensure that services and resources are available to the beneficiaries.

7.2 Differences between protection and accountability

The field study revealed four ways in which protection and accountability are different. First, in the broadest sense, protection can be translated into direct service delivery through a number of activities whereas accountability is most often a process or cross-cutting theme.

Second, protection is the responsibility of those who have the power to protect others. Protection is based on both the legal and physical aspects of vulnerable groups, whereas accountability is a result of self-regulation of humanitarian principles. Protection is based on legal codes in which people can be prosecuted when there is lack of compliance. While states are the primary duty-bearers of protections others such as NGOs also have a role to play. In certain cases, failure to provide protection involves breaking state laws (and in extreme case international law) for which criminal prosecution may result. In contrast, accountability is responsibility of both the organisations and the beneficiaries with whom they work to address concerns. Accountability CRMs are used to solicit feedback from beneficiaries and to self-regulate their organisations per HAP Standards. For example, HAP indicates that organisations that are unable to comply with Benchmark #5 should 'explain and justify the reasons for that to its stakeholders', noting that 'Not meeting requirements related to one principle may be unavoidable in order to meet another principle in that specific situation'.

CASE STUDY #10: AgeUK organizes community volunteers to ensure that the needs of elderly beneficiaries are met

Immediately following the earthquake, AgeUK relied on a network of older volunteers known as 'Home-based Friends' to support the most vulnerable elderly beneficiaries in their communities. AgeUK trained the older people who volunteered to be Home-based Friends in a variety of areas including disaster preparedness, income generation activities and advocacy. These Home-based Friends provided useful advice to the most vulnerable older people on how to stay healthy and how to protect themselves. In practical terms, the elderly were accompanied to distribution sites and they were supported if they needed health services. They were referred to the AgeUK health team or other organisations working in the camps. With the onset of the cholera epidemic, the Home-based Friends carried out an awareness campaign with other partners to ensure the needs of the elderly were not forgotten. The lessons from this activity were many. The training provided by AgeUK to this group improved the capacity of the community to work with older people during and in the aftermath of disasters this provided some level of sustainability. Many of the elderly volunteered their time in the service of others and found new opportunities to feel valued. The elderly had a direct link in the community to access information and resources from the camp committees. In this way, messages could be easily disseminated to older people living in the camps. In the process, the leadership standing of this group of elderly people also improved and, in the end, the Home-based Friends played a critical role in the AgeUK emergency response.

Third, in practice, DEC members have a rather broad understanding of protection and more specific concept of accountability. This understanding is informed through HAP accountability benchmarks, which is based on a specific set of elements that focus squarely on the beneficiary. There are a number of other elements of accountability inherent in effective programme design and implementation. In the case of DEC members in Haiti, these additional responsibilities include accountability to the British public and their wider donor base, financial and contractual accountability and ensuring that organisations also include participation and information sharing between local partners, among staff and across all levels of government.

Finally, when speaking to beneficiaries, their idea of accountability is wider than what is currently understood as a result of HAP interventions and training. That being said, the focus on increasing information flow and sharing decision making power with beneficiaries is necessary. If further developed and widened in scope of definition, and ultimately in practice, organisations will continue to strengthen their effectiveness as they continue to build their capacity to implement relevant disaster response programmes.

7.3 Reflection

Following discussion of the similarities and differences of protection and accountability, it is helpful to give some further thought to accountability and its relationship with protection in practice. At least three initial reflections stand out. First, a gap exists between how vulnerable groups and the humanitarian community view the relationship between protection and accountability. Organisations noted a connection with a rights-based approach at the same time international NGOs are also focused on 'Do No Harm' and humanitarian principles such as impartiality. At the community level, beneficiaries tend to view governments as being responsible and accountable to implement laws. This sense of responsibility extends to community representatives who are in a position of power. While not always the case (as

shown in Case Study #8), when these representatives were held accountable, then the general public – and vulnerable groups in particular – were better protected.

Second, a number of distinctions arose as noted above when reviewing the relationship between protection and accountability with DEC members. These distinctions were often aligned with a certain phase of the emergency response. In the case where mainstreaming was integrated, sufficient attention, resources were available and follow up were not always available for vulnerable groups in equal measure. Rather, the similarities and differences between the two were easily outlined and shared through examples as can be seen in the case studies included throughout this report. While not a widely held view, according to at least one interviewee, proxy happens ‘a lot’ and went on to say that HAP sometimes ‘replaces protection’ (e.g. when people understand that everyone must engage in participation). As the response progressed, agreed upon and began to use a shared language to discuss both protection and accountability, the debate resulted in a broader understanding among organisations.

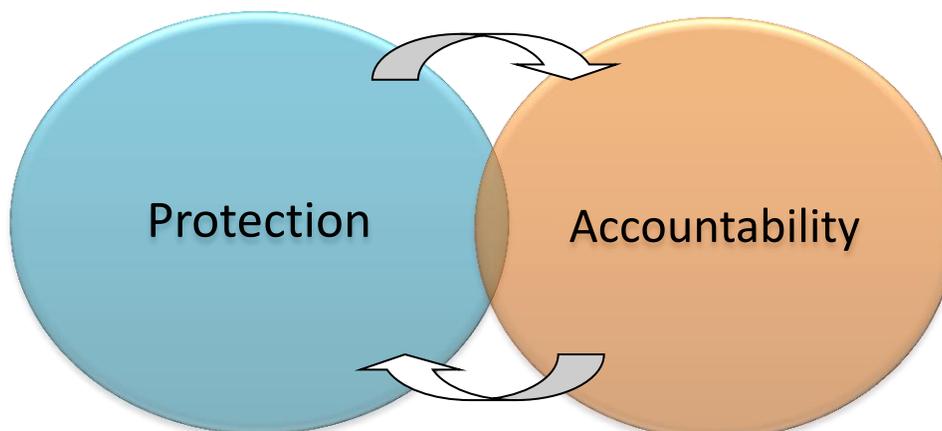
DEC members defined accountability through the language of HAP benchmarks. When discussing how accountability influences protection, DEC members cited participation and information sharing as elements of both protection and accountability. Because one or more of the principles or benchmarks of protection and accountability overlapped, accountability was viewed as an integral part of protection activities. An example is the use of complaints mechanisms. These were widely used as both protection and accountability measures by organisations where they can vary in purpose (i.e. beneficiary complaint mechanisms for programme integrity versus sexual exploitation and abuse (SEA) complaint mechanisms within GBV programmes).

Finally, the closeness of the relationship between protection and accountability varied between organisations and changed in the three years since the earthquake. As shown in Figure 1 below, these factors can change and lead to a varied relationship between protection and accountability. As discussed in Section 3.3, the nature of the response evolved over time. In the initial emergency response phase, organisations often designed programming with broad strokes that encompassed the overall population in affected areas, except in cases where an organisation had a single mandate for a specific group such as the elderly or the disabled. In these cases, protection and accountability were tightly linked, especially as information sharing, participation and feedback through CRMs. These overlaps continued as the emergency moved into the transition phase. During subsequent phases, as organisations moved into longer-term development programming (i.e. more than two years after the initial emergency), accountability was seen as being more of an integral part of protection as discussed in Section 7.1 above. Ultimately, this flexible strategy enabled a responsive approach

An additional point that emerged as a result of the study was how the use of technology, such as text messaging in addition to voice calls on mobile phones, served to enable the relationship between protection and accountability. This was observed by the study team as organisations built and expanded their internal CRMs. Currently, DEC members follow an individualized approach to communicating with beneficiaries. As organisations continue to strengthen the investigation and feedback loops of their organisational CRMs, it is important that they continue to look for creative ways to use technology, especially where beneficiaries have increasing levels of connectivity via mobile devices.

Elements of this shared understanding are outlined in both the observations and recommendations sections below.

Figure 1: The changing relationship between protection and accountability



8. Observations from the 2010 Haiti Earthquake Response

During discussion with DEC members, the study team gathered observations made on programme design and implementation. These are:

- 8.1 When the focus is put on spending funds instead of providing proper assessments to identify the needs of beneficiaries, it is difficult to deliver a quality response.
- 8.2 During the initial response, protection should be concerned with coverage, accessibility and security but during the transition to longer-term programming, there is a greater shift and emphasis on legal aspects of protection.
- 8.3 In order to promote earlier return to communities from camps, it is necessary to ensure that the 'pull' factors are identified and addressed at the community level at an earlier stage. In other words, the transfer of basic services to the community level as soon as possible.
- 8.4 Lack of coordination resulted in duplication of efforts and non-alignment with government policies and international conventions for a number of protection issues including child rights, GBV and the inclusion of elderly and disabled groups in wider programming after the earthquake.
- 8.5 Emergencies change over time and sometimes emergencies occur in a cyclical pattern thus exacerbating existing vulnerabilities and increasing suffering. As outlined in the report (see, e.g., case studies #3 and #6), there is a need to consider both standalone and protection mainstreaming based on the changing needs of the population.
- 8.6 Seconding senior staff to an international sister agency (as well as the more usual practice of local partners) is a valuable way of influencing programme design, sharing learning and building more effective response plans.

9.0 Recommendations to DEC members

To advance protection and accountability in programme design and implementation, recommendations to DEC members include:

- 9.1 **Assessment:** Organisations need to conduct more thorough rapid assessments and continue to update findings as the nature of the emergencies change over time. After the earthquake, for example, there was a common assumption that everyone had the same problems and need when different groups had varying needs. As noted above, only minimal quantitative data was collected by organisations such as estimated numbers of displaced and their locations and this could have been improved upon.
- 9.2 **Information/Data:** There is a need for specific data and indicators on beneficiary vulnerabilities so that organisations are better able to advocate for revised funding streams to support protection. The Cluster System could provide standardized emergency assessment formats at the onset of an emergency so that information is uniform. Organisations, in turn, need to ensure that they are collecting data that is consistent with the cluster guidance.
- 9.3 **Mainstreaming:** Once a programme is underway, inserting elements of protection and accountability mid-stream in a programme is not effective. These elements need to be either designed as standalone programmes or mainstreamed into the programme 'as soon as possible' after the onset of the emergency response.
- 9.4 **Capacity:** Organisations should share the UNOHCHR tool kit and other resources to build capacity of organisations to better design and implement protection programmes in emergencies widely with their staff at both the headquarter and field levels, and training should be conducted to determine how best to mainstream overall protection activities into initial emergency response programme design.
- 9.5 **Coordination:** Organisations should be encouraged to use and support the Cluster System, while ensuring that their accountability extends to government ministries at the national and local levels as appropriate following the principles of participation and information sharing. This is outlined in HAP as well as several organisational accountability frameworks.
- 9.6 **Accountability:** Currently, there is an emphasis on accountability to donors and beneficiaries but organisations are lacking in accountability to governments agencies, implementing partners and local staff. The definition of accountability needs to be widened to fully encompass a broader range of understanding. Organisations should continue to build capacity in the area of self-regulation.
- 9.7 **Risk management:** Organisations should identify creative approaches to risk management and disaster preparedness as an integrated component of programme design. The onset of the rainy season in Haiti, for example, highlighted the present and ongoing vulnerabilities of many Haitians, particularly those living in the post-earthquake settlement sites. Yet the degree of preparedness is generally low, particularly as organisations phase out of emergency programming.
- 9.8 **Disaster Response Preparedness:** Organisations should ensure that an ongoing focus of efforts be directed toward DRR in infrastructure preparedness, protection, staff training, planning, education (of staff and of Haitians) and agency coordination.
- 9.9 **Government support:** Organisations should seek closer ties to the government without compromising target goals. This is especially important to ensure that activities do not further increase the vulnerability of the population by embarking on activities, which

may be consistent with international conventions, but do not take into account or respect local traditions and norms.



DEC members discussing external elements affecting their work since the earthquake

10. Other observations and recommendations

Many observations were made during the study, some of which extended beyond DEC membership and may be relevant to the wider humanitarian community. Here are some of the more pertinent related to increase effectiveness of response, funding and improved partnership:

- 10.1 Clarification toward a shared definition by donors, partner organisations and protection Cluster leads on the definition and meaning of protection mainstreaming would be beneficial.
- 10.2 There is a lack of a concrete and well-established relationship between donors and organisations as it relates to a clear understanding of the specific funding needs during emergency response and transitional, or longer-term development funding. Donors should reach across the development and emergency response funding silos and work with the global protection cluster to identify possible scenarios and responses to address future emergency protection programming, including the identification of preparedness and risk factors affecting vulnerable groups during and emergency response.
- 10.3 Donors that fund emergency response should create a working group to address issues of partnership, programming and accountability to better support implementing agencies by creating stronger coordination ties at the donor level.
- 10.4 A DEC-funded and coordinated initial assessment would both promote collaboration among DEC members and increase implementing partner capacity to obtain essential baseline data of a universal nature in the early stages of emergency response.

10.5 To implement at a large scale, as was required in Haiti, strong planning processes need to be put in place to allow teams to balance immediate priorities and longer-term needs. The BRC, for instance, highlighted the need for stronger technical advisory support, specialist logistics support and context analysis were key internal learning points and as a result, it is developing a new handbook in a response.

10.6 Donors should allow for the inclusion of funds in proposals (alternatively, allow for organisations to recoup funds if programme funds are awarded) to conduct rapid and other baseline studies in the early stages of the disaster response.

10.7 The understanding of the roles and responsibilities of DEC is not generally well understood by member field staff. As a funder, DEC does not have stipulate requirements as a donor normally would. Indeed, member organisations are 'entitled' to funding raised by DEC from the British public. Therefore, DEC does not predetermine how the funding should be spent nor provides a vision for programming. DEC does not have a coordinating role and would not such a responsibility during emergencies. Instead, DEC members are meant to coordinate with the appropriate mechanism in a given situation and decide their own approach, target area and beneficiaries.

Testing a joint complaint response mechanism:

In the coming year, Haiti (along with the DRC and Ethiopia) will be a pilot country in the development of a joint CRM. IOM will be the lead agency in Haiti. With help at an international level, it is likely that this may be the future of CRM and the relationship between protection and accountability will continue to be close. There are inherent difficulties in aligning a CRM because of differences between organizations and where they are in terms of implementation. To be effective, there are many questions to consider, including: 1) who will receive and dispatching complaints and will this be an independent body; 2) who will investigate the complaints when a decision is made that this is necessary; and 3) how will the principle of confidentiality be ensured? In general, these mechanisms should be informing all programming, especially if this is not only a mechanism prevention of SEA but also handles complaints with regards to quality of services being provided. Currently, not all NGOs that have CRM in place have protection programs. This means that the accountability teams should be providing support to all programs on mainstreaming protection in their programming.

Annexes

I. Glossary of abbreviations

AAH	ActionAid - Haiti
BC	Build Change
BRC	British Red Cross
CAFOD	Catholic Agency for Overseas Development
CEDEW	Convention on the Elimination of all forms of Discrimination against Women
CFW	Cash-For-Work
CRC	Convention of the Right of the Child
CRM	Complaint Response Mechanism
CRPD	Convention on the Rights of Persons with Disabilities
CRS	Catholic Relief Services
DEC	Disasters Emergency Committee
DINEPA	<i>Direction Nationale de l'Eau Potable et Assainissement</i>
DRR	Disaster Risk Reduction
SEA	Sexual Exploitation and Abuse
DNH	Do-No-Harm
FIDH	<i>Fédération Internationale des Ligues des Droits de l'Homme</i>
GARR	<i>Groupement d'appui aux rapatriés et réfugiés</i>
GBV	Gender-Based Violence
HAP	Humanitarian Accountability Project
IBESR	Institute of Social Welfare and Research
ICG	International Crisis Group
IDP	Internally Displaced Person
IHL	International Humanitarian Law
IHRL	International Human Rights Law
ILO	International Labour Organization
M&E	Monitoring and Evaluation
MINUSTAH	<i>Mission des Nations Unies pour la stabilisation en Haïti</i>
MSM	Mass Sanitation Module
NFI	Non-Food Item
ODA	Overseas Development Assistance
PADF	Pan American Development Foundation
PDNA	Post-Disaster Needs Assessment
RNDDH	National Human Rights Defense Network in Haiti
UN	United Nations
UNFPA	UN Family Planning Association
UNICEF	UN International Child Emergency Fund
UNOHCHR	UN Office of the High Commissioner for Human Rights
WASH	Water, Sanitation and Hygiene promotion

II. DEC-Haiti protection and accountability study final schedule

	Organisation/Event	Details
Jan 13: Sun	BuildChange, CAFOD Partner	Noll Tufani, Director of Programmes
Jan 14: Mon	Oxfam	Hadson, Richard, Soudnie and Damien (CD)
Jan 15: Tues	Organize Partner Workshop	Confirm Venue, Invite Participants
Jan 16: Wed	WVI	Michelet Policard, Protection Capacity Building Officer
Jan 17: Thurs	Merlin	Hazel Siri, Country Director, Merlin
	Help Age	Jean-Claude Gosselin, CD, AgeUK International Haiti
	Concern	Jeanfernel Tham, Deputy CD
Jan 18: Fri	Christian Aid	Lucia Mbofona
	Tearfund	Jean Claude Cerin, Country Representative
	Oxfam	Marie Soudnie Rivette, Gender & Protection Adviser
	BRC	Wendy McCance, Programme Delegate Melvin Tebbutt, CD
Jan 19: Sat	Enpak – Women’s research organization	Joanne Lafontant, Executive Director, ENPAK
	USAID/OFDA	Andrew Kent
Jan 21: Mon	MINUSTAH	Annie Raykov, Protection Cluster Coordination Team and
	OHCHR	Laila Bourhil, Human Rights Officer
	WVI	Caroline Rose-Avila, Head of Advocacy and Protection
Jan 22: Tues	Partners Workshop	Montana Hotel
Jan 23: Wed	CARE	Rodrigo Melo, Infrastructure Manager, DEC Project Manager
	Ministry of Social Affairs (IBESR)	Arielle Villedrouin, Director General, Institute of Social Welfare and Research
	UNICEF	Christine Peduto, Protection Section Head
Jan 24: Thurs	Field sites visits: Corail and La Piste	Oxfam and British Red Cross
Jan 25: Fri	UNICEF Follow-up	UNICEF meeting cancelled, rescheduled for Monday, 1/28
Jan 26: Sat	Oxfam	Damian Berrendorf, CD Cecilia Millan, former CD now at regional level
Jan 28: Mon	UNICEF Follow-up	Hans Beauvoir, Protection Officer
	Action Aid	Daniel Gedeon, Emergency Programme Manager
Jan 29: Tues	Wrap-up & Departure	

III. Resources and toolkits for protection in emergencies

Toolkit for Protection in Emergencies, developed by the Haiti Protection Cluster, under the direction of the UNOHCHR, 2012.

The **Aid and International Development Forum (ACAPS)** is dedicated to improving the assessment of needs in complex emergencies and crises. This is an initiative of AgeUK and Merlin in partnership with the Norwegian Refugee Council. www.acaps.org

The **Economic Livelihoods and Budget Analysis for Good Governance (ELBAG)** was developed in strategic partnership with ActionAid. www.elbag.org

Church World Service, Protection Mainstreaming Manual, 2012, also includes training pack used by DEC-funded partner Christian Aid to inform protection mainstreaming programme design. http://hunger.cwsglobal.org/site/PageServer?pagename=resource_protection_manual

To achieve impact measurement and accountability in emergencies, **The Good Enough Guide** of the **Emergency Capacity Building Project (ECB)**, co-sponsored by DEC members CARE, CRS, Oxfam, Save the Children, and World Vision in partnership with Mercy Corps, provides field workers with simple steps to put local people at the centre of emergency response and measure programme impact in emergency situations. www.ecbproject.org

The objective of the **Advanced Training Programme on Humanitarian Action (ATHA)** is to enhance the capacity of relevant actors operating in the humanitarian context, to strengthen the respect for and knowledge about Humanitarian Action including International Humanitarian Law and Humanitarian Principles and to create greater awareness and knowledge of the relationship between development cooperation and humanitarian action in emergencies. www.atha.se

The Sphere Handbook, Humanitarian Charter and Minimum Standards in Humanitarian Response, a set of common principles and minimum standards in of humanitarian response that helps insure impartial access to assistance. www.sphereproject.org

Inter-Agency Working Group for Child Protection in Emergencies, February 2010. www.cpwg.net

Women Watch, an Initiative of the Inter-Agency Network on Women and Gender Equality (IANWGE), www.un.org/womenwatch/directory/gender_training_90.htm

Protecting Older People in Emergencies: A Good Practice Guide, developed by HelpAge, 2012. info@helpage.org

Protection Interventions for Older People in Emergencies, which will be aimed at field workers will be available in April 2013 from HelpAge. info@helpage.org

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