

# OBJECTIVE 3

## Provide Protection

**Sub-Objective 3.1:** Increase access to protection services

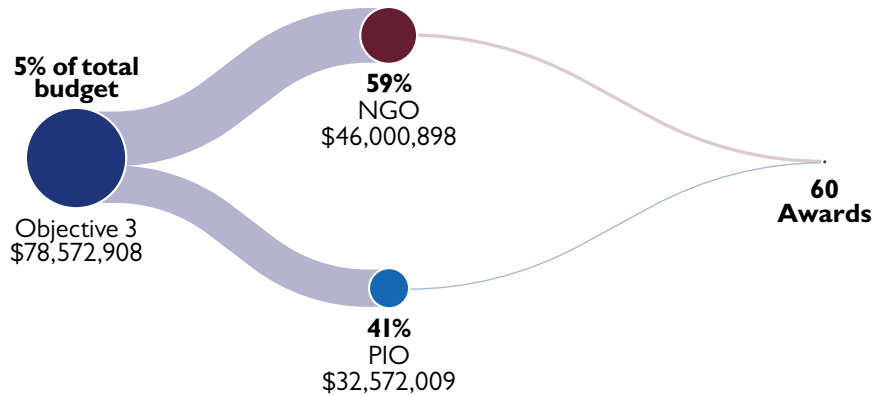
**Sub-Objective 3.2:** All programming must address COVID-19-specific gender and protection issues

**Sectors:** Protection, Gender, Age, Social Inclusion (GASI)

### KEY FINDINGS

- Indicator achievement was mostly high, though results were often lower for PIOs than NGOs, with the exception of GBV services, where 75 percent of PIOs and 73 percent of NGOs met at least 90 percent of their targets
- IPs that did not receive the Supplemental in FY 2020 were re-integrated in FY 2021 after administration changes with high perceived success
- Awards had a heavy focus on GBV prevention and referral
- Fewer than half of awards focused on older populations who were at higher risk due to COVID-19-related vulnerability
- Protection activities reached a large number of people and were considered 'lifesaving'

### OVERVIEW OF AWARDS



Office of Africa received the most Supplemental funding. **Syria** was the top-funded country, followed by **South Sudan** and **Venezuela**

### KEY RESULTS



907,399 individuals accessed prevention and referral services



435,753 individuals participated in child protection (CP) services



571,893 individuals participated in Mental Health and Psychosocial Support Services (MHPSS)



83,619 individuals participated in protection training

### PROMISING PRACTICES + OUTCOMES

Remote modalities expanded services to hard-to-reach populations

High uptake and expansion of virtual safe spaces

Reduced risk through remote service modalities

Expanded coverage allowed for broader reach, including into contexts and populations that were novel to some IPs.

More individuals were trained to address protection concerns, which improved screening and service referral

Protection activities were critical in contexts with covariate shocks

Integration of protection in other sectors provided entry points to identify vulnerable individuals and provide referral pathways

### PROGRAMMING CONSIDERATIONS

1. BHA should continue supporting IPs to expand coverage to populations and contexts highly vulnerable to protection concerns. Localization and efficient local subcontracts to partners is critical for this.
2. Polycrises and subsequent shocks exacerbated protection concerns. IPs should consider the multiplicative impacts of shocks during programming. BHA can support by sharing lessons and successful activities across partners.
3. IPs should consider expanding remote modalities where possible to improve reach, safety, and accessibility of protection services.
4. Sustainability/durability of protection-specific activities and outcomes should also be better supported through multi-year funding.

## Background

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COVID-19 restrictions, such as lockdowns and inhibited movement, coincided with covariate shocks such as conflict, and increased protection issues and vulnerability, particularly for women and children (Baranov et al., 2022). Protection concerns in FY 2021 mirrored those in FY 2020, including higher risks of violence (gender-based violence (GBV), child violence) and worsened mental health outcomes. In 2021, awareness of the 'shadow pandemic' of increased GBV grew, driven by gender inequity, overburdened essential services, barriers to women's income-generating activities, and movement restrictions that kept victims in close contact with perpetrators of violence (Sharma et al., 2021; Felten, 2023). Economic stress from COVID-19 is expected to have long-term effects on GBV, underscoring the need for durable protection programming (Baranov et al., 2022). Food insecurity, a known predictor of GBV (Ricks et al., 2016; Moraes et al., 2016), child maltreatment (Jackson et al., 2018; 2019; Helton et al., 2019), and poor mental health outcomes (Fang et al., 2021), was a significant secondary impact of COVID-19. Food assistance (see Objective 2), comprised the majority of the Supplemental and may have inadvertently mitigated some of these issues beyond protection mainstreaming and protection-specific programming.

A major shift from FY 2020 to FY 2021 is that the FY 2021 Supplemental elevated the Protection sector to a separate funding objective. FY 2021 Protection funding increased to approximately five percent, compared to four percent in FY 2020. More Protection sector awards were allocated to NGOs, but with less funding per award than PIOs. Across PIOs, UNICEF received the most awards (10), followed by IOM (7).

The main primary data sources used for Objective 3 include two Scoping Interviews with BHA, eight KIIs with IPs (n=13) and one BHA AOR KII (n=3) across nine awards, IP E-survey results, content analysis of all available Protection sector award reports, and field perspectives from Honduras/Northern Triangle, Syria, and South Sudan.

Protection awards were almost entirely multisectoral with only seven protection-only awards. Protection awards were largely coupled with Health (61%) and WASH awards (49%). Despite the established connection between food insecurity and protection, only six food assistance awards incorporated protection-specific activities, although many more incorporated gender and protection mainstreaming. Integration of Protection with other sectors provided an entry point to identify vulnerable individuals and provide referral pathways.

## Indicator Results (Outputs)

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**Key Finding: There was high achievement for most award activities.** In FY 2020, half of the protection indicators were met. In FY 2021, this varied by recipient and service (Annex E.3). Across NGO priority indicators, > 70 percent of awards achieved ≥90 percent of their Life of Award (LOA) targets (Annex E.3) Some key results are highlighted below (Table 4); see Annex E.3 for a full list of NGO and PIO Protection priority indicators. In most cases, at least half of targeted individuals received services, although there was less mainstreaming to support the needs of persons living with disabilities (PWD) and older individuals. This is discussed further in the last key finding of this objective section.

**Key Finding: Re-integration of IPs that did not receive FY 2020 Supplemental with high perceived success.** Some PIOs did not receive support from BHA in FY 2020 but were funded in FY 2021 after USG administration changes. Interviews with these organizations and communities where participants received services suggested a high level of perceived impact from their programmed protection activities.

**Table 4. Common Protection output indicators across awards, by NGO and PIO percent met**

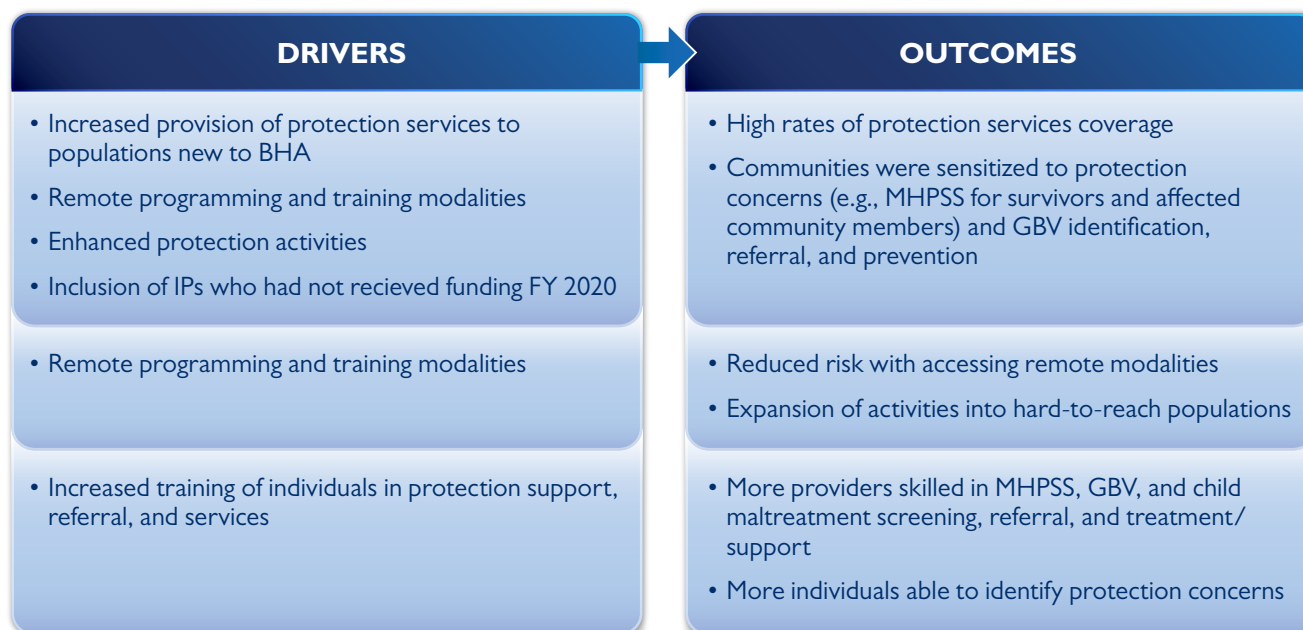
<p><b>907,399 Individuals accessed GBV services</b></p> <p>75% PIO met ≥90% targets</p> <p>73% NGO met ≥90% targets</p>	<p><b>435,753 Individuals participated in CP services</b></p> <p>50% PIO met ≥90% targets</p> <p>90% NGO met ≥90% targets</p>
<p><b>571,893 Participated in MHPSS</b></p> <p>78% PIO met ≥90% targets</p> <p>96% NGO met ≥90% targets</p>	<p><b>83,619 Individuals participated in training</b></p> <p>83% PIO met ≥90% targets</p> <p>79% NGO met ≥90% targets</p>

## Key Outcomes and Drivers

Drivers of promising practices (Figure 7) included providing protection services to contexts and populations that were new to some IPs (e.g., Indigenous and urban communities, refugees), developing and refining remote modalities, enhanced protection activities (e.g., safe spaces, support groups), increased access to livelihood activities for affected populations, and training for staff working in the Protection sector.

Interventions resulted in high rates of coverage, expansion of activities into hard-to-reach populations, potential reduced risk of retribution for accessing some services (e.g., GBV protection), an increased number of individuals trained to identify the signs of child maltreatment and GBV, and more providers skilled in providing MHPSS, GBV screening and referral, and child case management services.

**Figure 7. Key drivers and outcomes associated with Protection sector awards**



## Promising Practices

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Protection awards with novel or promising approaches are outlined in detail for each of the sub-objectives in Annex E.3. A literature review and summary of best practices in providing protection support in the context of COVID (Annex E.3 –full search strategy and methodological approach) indicated expansion of protection services, especially for MHPSS, child protection, and GBV, introduction of novel remote modalities, and training individuals to provide protection services were effective strategies (Armijos et al., 2023; Banke-Thomas & Yaya, 2021; Pfitzner et al., 2022; UNICEF, 2021; Metzler et al., 2021; Williams & Pontali, 2021). This mostly aligned with Supplemental award activities, examples included:

- Virtual safe space smartphone app with a rapid close function (developed by an all-female IT team)
- Dignity kits that contained COVID-19 prevention materials
- Mobile teams provided remote MHPSS support
- Mobile clinics provided sexual and reproductive health services to hard-to-reach populations
- MHPSS helplines

In Honduras, GBV and domestic violence training was offered via Parent School Training, which was a novel venue that addressed protection concerns for women and children. In the Government of Syria controlled areas, mobile teams were critical to making services accessible.

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*“Mobile teams ensured access to all participants in rural areas, providing education and psychological support, demonstrating the organization’s adaptability and reach.” ~ IP KII*  
**MENAE**

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**Key Finding: In terms of mainstreaming across awards, there was a greater focus on supporting women and children, less focus on PWD and older populations.** For Objective 3.2, addressing the COVID-19-specific gender and protection issues in addition to mainstreaming, the evaluation finds there was an increased focus on protection risks such as GBV, though less focus on older individuals, LGBTQIA+ populations, other vulnerable groups. From review of the Supplemental award reports, for example, there was less focus on PWD and older individuals (46/64 Protection sector awards compared with 59/64 with a focus on programming or referral for GBV). The evaluation estimates less than 10 awards globally including LGBTQIA+ participants, the majority in ALAC region. Although BHA award reporting guidelines ask that IPs report on all groups that received assistance, the reality is that this not always included in final and annual report documents. IP KIIs also explained that unless the project included targeting criteria and activities to specifically support these sub-groups, they may not have been adequately reached. One IP in the Northern Triangle specifically worked with LGBTQIA+ participants, who expressed that they feel left out of traditional humanitarian response. This IP also emphasized that collaboration with local partners was critical for reaching marginalized groups, a sentiment that was echoed by another IP who mentioned reaching people with disabilities by working with other IPs as a part of the localization agenda. IPs noted challenges with subcontracting local partners and the need for multi-year funding to gain trust of these communities.

## Challenges and Durability

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Durability is contingent on context and the extent that Protection is integrated with multi-sectoral programming, as noted in the other Objective sections. In South Sudan, a KII expressed the need for skills training and livelihood support for women, but that the IP working in the area was focused only on emergency needs, limiting sustainability. Additionally, due to cultural conceptions around GBV and lack of trust in government reporting structures, individuals may have been less likely to report GBV or engage in protection activities. The trust required for effective Protection programming requires long-term community engagement, a key finding also from the FY 2020 COVID-19 Supplemental evaluation.

## Relevance To Needs

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**Key Finding: Overall, protection activities were able to reach a large number of participants and were perceived to be “lifesaving.”** Sector activities were accomplished through: expansion of dedicated protection services into novel populations using remote service delivery; enhanced protection activities in contexts with covariate shocks or protracted crises; reintegration of IPs that provided lifesaving protection activities but that had not received assistance in 2020, with high perceived success; high achievement for most activities (excluding child protection among PIOs who underachieved targets); focus on supporting women and children; and integration of protection across sectors (i.e., mainstreaming), which sometimes allowed for an entry point from other sectors to identify vulnerable groups and provide services.

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*“...We’re often the only ones providing these types of [protection] services and just in and of itself, these are lifesaving. We’re saving lives just by having these interventions, especially with the amount of support through this grant.” ~IP KII PIO*

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## Programming Considerations

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1. BHA should continue to look beyond populations typically reached by IPs to include individuals and groups with high levels of vulnerability in humanitarian contexts (e.g., urban, indigenous, refugee, LGBTQIA). Close coordination and collaboration with local partners is crucial for building trust in order to access difficult-to-reach, vulnerable population groups to ensure service provision. BHA should encourage IPs to work with local and community partners as part of the localization agenda.
2. Protection concerns were exacerbated by polycrises and overlapping shocks, with the pandemic posing especially critical threats to women and girls (the ‘shadow pandemic’). IPs should consider the implications of multiplicative shocks on protection concerns to subsequently target and plan accordingly. BHA should generate and share lessons from successful activities across IPs and regions. This is especially critical as shocks increase in frequency and severity.
3. Remote modalities improved reach of award activities and in some cases bolstered the safety of accessing protection services. BHA should continue to make investments in IPs building remote interventions, especially when they expand into populations that are hard-to-reach.
4. Sustainability/durability of protection-specific activities and mainstreaming should be built into all activities, with a shock-protective lens. Evidence from this evaluation suggests that sufficient and multi-year funding streams are critical to maintain protection outcomes in protracted, multi-shock settings.

Note: the evaluation findings largely align with that of the USAID COVID-19 [Evaluation on Inequalities and Unintended Consequences](#) (2024).