



How to address protection in urban humanitarian response

(90 mins)

Leah Campbell: Hi everyone, and welcome to today's ALNAP Urban Webinar. I believe this is the 20th Urban Webinar we've ever done. We started the series in 2013, and we do a few of them every year, so great to have you all with us, and hello to everyone who's joining just now. My name is Leah Campbell, and I am a Senior Research Officer at ALNAP, which is a network of humanitarian organisations focused on learning. We started this webinar series to provide a space to hear from different organisations working in urban context to share practical experiences around areas where lessons still needed to be shared and learned, so each webinar focuses on a different topic, and today's is about protection in urban humanitarian response.

Shortly I'm going to introduce our speakers to you, but before I do that, we're going to also put up a poll so that we can find out a bit more about who is in the room. So have a look at that poll, while I'm reading out our speaker bios, and so then we can get a sense of who all of you are. There will also be a survey for your feedback at the end of the webinar, which we ask you all to share with us. We look at the results of these very closely, and try and take on feedback for future webinars, so please do have a look at that when it pops up at the end of the webinar.

So we have two speakers with us today. I'm going to introduce them to you now, and then we'll hear from them a presentation. We'll also then have time for your questions. We'll start with questions which were submitted in advance, and then we'll also take your questions live. So, who are our two speakers? First we have Angela, who is the Global Advisor on Internal Displacement with ICRC. Angela has worked with the ICRC for over 15 years in various capacities, in Serbia, Colombia, Kenya, Sudan and Geneva, where she's focused on the protection of civilians and others affected by armed conflict and violence. In her current role, she leads ICRC's reflection on strengthening protection for internally displaced people through operational and policy engagement, and she co-authored the ICRC's 'Displacement in Cities' report, which she's going to talk to us about today. She's also published on topics related to urban internal displacement and implementing community-based protection approaches in displacement settings. She is trained in political science from the University of Florence, and holds a doctorate in international law.

Then we also have Haidi Sadik who is head of media at Sea-Watch, which is a rescue NGO, responding to the humanitarian emergency in the Mediterranean. At Sea-Watch, she acts as a spokesperson representative, while also looking after the coordination of protection activities in this context. The experience Haidi is going to share with us today, relates to her role as a Project Manager with Medair, where she oversaw the design, quality and implementation of a pilot project in Amman, on urban protection, which delivered a combination of multipurpose cash and multisectoral case management for both Syrian refugees and vulnerable Jordanian households. Previously, Haidi has also worked for Save the Children, Restless Development, and she also set up a small UK-based NGO. Haidi has a BSc in human geography and international relations, an MSc in international development studies from

the University of Amsterdam, and an MA in the politics of conflicts, rights and justice from SOAS in London.

So welcome both to Angela and Haidi. Before I turn over to them, we're going to share the results of the poll. So we have a bit of a mix of all of you on the line, and there are about 120 of you so far here with us. 41% of you don't know much about either protection or urban context, so you're in the right place, because we're going to talk about both of those things today. 43% of you have a specialism in protection, but don't know much about the urban context. 13% of you have a focus on urban, but don't know much about protection, and 3% of you are experts who we really should have contacted to speak on this webinar, so apologies for that. Hopefully we can still share something new with you and by all means, as well as your own questions, everyone is free to share their own reflections and experiences using the chat functionality. My colleague here at ALNAP, Grace, is on the line to answer you via the chat and let you know that your questions have been taken into consideration, and also here from ALNAP, behind the scenes, is Cara, our Comms Officer, who has designed all of the graphics you will see in the presentation, and will be making sure that we all run smoothly today.

So I'm going to turn over now to our first speaker, who is going to share with us her presentation on protection in urban displacement settings. Over to you, Angela.

Angela Cotroneo: Thanks very much, Leah. So, very nice being with you all. So I'd like to share some reflections on the challenges of protecting internally displaced persons, IDPs, in urban settings, outside camps. As emerged from a study that the ICRC published last year, and this will give me the opportunity to discuss protection in different types of urban displacement context, cities at war, cities of refuge in counties at war, and cities affected by urban violence.

So the ICRC displaced in city report (ph 06.14) stemmed from the awareness that internal displacement is increasingly urban. But little is known about people's experience of displacement in cities outside camps, and improvement is still required to address their needs. Their report is based on case studies in Maiduguri, in Nigeria, Baidoa in Somalia, Mosul in Iraq and San Pedro Sula in Honduras, interviews with key informants and a literature review. It considered the perspective of urban IDPs and their hosts on their situation, it examines the humanitarian response, identifying inspiring approaches and challenges, and it reflects on how to strengthen the response.

We found three main shortcomings, in the typical humanitarian response to urban displacement outside of camps. First, a focus on camps, when camps exist. Even though we all know that many people do not settle in camps. Second, a gap in both the emergency response, and the longer term response. That is urban IDPs outside camps, very often don't receive support and struggle to meet their basic needs, and when support is provided it tends to focus on people's survival, that's falling short of helping them to rebuild their lives and to restore a sense of dignities. And third, an overreliance on blanket responses versus individualised response, particularly in situations around conflict. And this means that IDPs' specific needs, often remain unaddressed.

Shortcomings in the humanitarian response are often attributed to the scale and complexity of the cities, their rigidity of planning and funding schemes, lack of understanding of the role that humanitarian can play in such settings, and the limited urban expertise. We argue in the report that shortcomings also results from the fact that responses are built on unverified assumptions. For example, it is commonly believed that IDPs outside camps are better off than those in camps, because they're hosted by relatives, or can afford to pay rent. And this explains the focus on camps, and the gaps in the emergency and longer-term response. It is also believed that IDPs outside camps are difficult to reach, leading to blanket responses, rather than individual ones, and that IDPs outside

camps face the same problems that urban poor, and hence again blanket responses. These assumptions may be true in some cases, but are not universally true, but still they inform the response without being assessed against the local reality.

Our study has shown that people experience-, of course it's influenced by different factors, including individual characteristics, such as gender, age and capacity, but particularly these shaped by their location and pattern of displacement. And the challenges of protecting people, variety depending on whether they find themselves in city on the frontlines of armed conflict, in a more stable city in a country at war, or in a city affected by urban violence.

Civilians trapped in a city at war, think of Mosul or Aleppo, are often in a life or death situation. Protecting them involves striving to limit the impact of urban warfare on their lives and property, but also on interconnected urban services, upon which people are highly dependant for their wellbeing. Hospitals, schools, water instillations and electric plants, for example. Protection in a city at war requires working to strengthen respect for international humanitarian law by all parties to reduce people's suffering, to help them avoid displacement, but it also requires efforts to ensure the people can flee safely to a more secure location, because living may be the only way that people have to avoid immanent danger or hardship. So it is important to build a protection dialogue with all of the parties to the conflict, but in our experience it's also important where possible to engage directly with communities at risk, A, head of military operations to help them better prepare for the eventuality of displacement. And lastly, a city at war today will become a city of return tomorrow, once the fighting is over. So although the focus may be currently on emergency responses, protection efforts must be informed by durable solutions, consideration, it is important to anticipate possible obstacles to future return, such as destructions of homes or weapon contamination.

As far as cities of refuge from military operations are concerned, protecting IDPs in this setting, think of Maiduguri, (? 11.46) or Bogota, poses a different set of challenges. Access, per se, is normally not an issue. The difficulty for humanitarian actors comes from dealing with a large influx of people, living dispersed within those communities, and facing multiple needs. Some of which are specific to them, and others are shared with their hosts. So how we local IDPs, how to decide whom to prioritise in the response, to ensure the meaningful participation of IDPs in host communities, both in design and implementation of responses. Protection concerns of IDPs are less obvious here than in a city at war. They typically result from inadequate domestic frameworks, lack of access to document, stigmatisation, tensions with host communities, and economic insecurities too, because the lack of livelihood, fosters harmful survival strategies, child labour, or transactional sex, and contributes to the risk of forced eviction. Thus it is needed to have a broad prism of analysis to understand IDPs vulnerabilities and protection concerns. Response-wise, the focus must be on supporting IDPs to rebuild their lives in the city by intervening at different levels, individuals, host communities, municipal and central authorities. In particular, engaging with authorities and durable solution is key to ensure that IDPs local integration is facilitated as a possible option, in addition to voluntary return, and to avoid people facing pressure to go back to unsafe or to premature circumstances.

In cities affected by urban violence, the first challenge to ensure protection of people who are displaced within or to the cities, is their identification. This is in part because internal displacement that is related to urban violence, has a gradual and individual nature, it happens-, (? 13.57) is the saying in Central

America, as opposed to mass displacement in conflict situations. And also because flee (? 14.04) violence by gang members, often chose anonymity as a self-protection mechanism. They keep

a low profile, reduce their movements, avoid to approach the authorities, out of fear of being pursued by the armed group who caused their displacement in the first place. In these situations, do no harm considerations must be incorporated in all efforts to locate IDPs and to engage with them. Specific challenges arise when local authorities are reluctant to recognise urban violence related displacement, and of course challenges are there for when it comes to dialogues with gangs, because engaging with them on protection issues, I mean, is usually very difficult, and this limits the possibility to prevent the conditions that cause people displacement in the first place. Return home is hardly an option for IDPs in these settings. Local integration can be a solution for those IDPs who can find relative security in the new place, but for some, the nature of the individual threat that they face, means that they may not find protection anywhere within the country, and may need to be helped to move abroad. So a good understanding of the different profiles of cases is necessary to anticipate the difficulties people may encounter, and to try and adapt the protection response accordingly.

Another specificity in these type of urban settings, is the overlapping between communities of origin and host communities, because people often move within the same city, from a violence-affected neighbourhood, to another control by the opposing gang. This creates opportunities in terms of establishing synergies, constructive links between the response to IDPs and the broader urban violence response, for example community project in violence affected neighbourhoods can facilitate identification of IDPs within the community who may need specific support. At the same time, it may be difficult for humanitarian actors working in the community to help persons at high risk to leave and to relocate as well, because these may trigger security threats by the armed group controlling the neighbourhood.

Let me show some lessons learned from the ISIS experience in Central America. So what is needed for the response to urban displacement-, to urban IDPs in these type of settings, in cities affected by urban violence to be affected. First, establishing a local network for case referral and support can facilitate identification of highly vulnerable IDPs, and addressing their multiple needs. In this regard, of course, corporation and coordination with local authorities and in grassroots organisations, National Red Cross, Red Crescent Societies, church, community leaders, etc., and other relevant actors is key. It requires a clear understanding of respected mandate, working modalities, and end criteria for support. And providing feedback on cases that are referred to us by other actors, organising working sessions to share expertise and experience has also proved valuable to foster a shared analysis of the problems, and also of the roll that each actor can play.

Second lessons learned, psychosocial support and livelihood support contributes to IDPs protection in the longer-term by helping them rebuild their lives. If IDPs were safer in the new location, can access employment or start a small-scale business, they won't need to resort to harmful survival mechanisms, such as moving again to a more violent neighbourhoods where rent is cheaper, or returning to a safe circumstances, or resorting to regular migration. Third individualised responses for the most vulnerable IDPs are key, but they must be combined with a more structural approach, aimed at supporting the authorities to develop an institutional response in the long term. This implies, for example, supporting the authorities to adopt and to implement specialised legislation and specific protection programmes.

We have also seen that acting as convener to facilitate forums for exchanges and coordination between the central authorities and municipal authorities may also be beneficial. And fourth, we need to develop community-based protection approaches that are adapted to context, where communities are

fragmented and distrustful, and where there are serious constraints that are related to access, to security and the do no harm principle. It is very-, I mean, it is hardly feasible to hold open focus group discussions on protection within a community setting where perpetrators and affected people live next to one another, and where affected people may therefore bear repercussions if they speak freely about their concerns. So people may need to be approached outside the community, in a place that can guarantee their safety and confidentiality.

By way of conclusions, through the study we have identified four avenues for improvement. First it is key to announce engagement with affected populations. Humanitarian organisations have of course made a lot of effort in this regard in the last years, but the practice sometimes steers away from that, and in part this is because consulting people takes time, and it's fear to create expectations that cannot be met. What is particularly important, is that given that it can be difficult to reach IDP in urban settings, we must look for ways of ensuring two-way access to also allow people to safely come to us, such as establishing hotlines for example, or exploring the potential of using information and technologies and social media.

Second, focus on people's dignity and resilience. IDPs need to be supported before they become completely destitute, and until they can resume a dignified life. This means that we must better articulate short and long-term interventions, and approach emergency support and resilience building as simultaneous elements and dimensions of the response, rather than a sequential times of the response. And of course, as I mentioned before, we need to work at different scales, through structural interventions and tailored responses.

Third, responses must be build on a proper understanding of the situation of IDPs in cities, and their impact on host communities, and fourth it is key to team up. We need to ensure complementarity and coordinated efforts by humanitarian development organisation to support authorities and other central and municipal actors in developing a good response. Development organisations may be better placed than humanitarians to work with public authorities on structural issues, but often they're not in a position to address specific vulnerabilities at the individual or household levels, which is something that humanitarian actors can do. And humanitarian organisation may also have a well-developed capacity in areas that still remain out of reach for development organisation. And last but not least, government engagement and ownership are crucial to achieve protection (? 22.25) for IDPs.

Thank you.

Leah Campbell: Great, thank you so much Angela for that really interesting presentation. Before I turn over to Haidi, a quick reminder to everyone that you can submit questions throughout the webinar using the chat functionality, so please do so. We will turn over for our next presentation from Haidi.

Haidi Sadik: Thank you Angela for that interesting presentation and everyone for attending. I hope that mine will give you a bit of insight into a specific project on urban protection in Amman, and I do invite the experts on these topics to also contribute so that we can learn together.

So I'll just be laying the context for this programme before I explain how it worked. So Medair had been in Jordan since 2012, and so a couple of years in, with refugees from Syria being in Jordan for multiple

years, we were well beyond the emergency phase. But there still-, I mean 85% of the refugees in Syria live outside of the camp settings in urban areas, and so there was a real setting of exclusion of

refugees from national, social protection structures, even though they lived in the city among the host population, they were still largely excluded from many of the services available to them.

The setting in Jordan is very cash-dominant. Cash transfer programming is very popular modality there, and UNHCR has a special agreement with financial institutions as well to coordinate from assessment to delivery of cash programmes. There is also a policy requirement in Jordan for 70% Syrian beneficiaries, and 30% Jordanians, so that is also something to bear in mind when I explain the details of this programme. And then there's also a bit of context on Medair's previous programming there. Our biggest programme was in healthcare, actually, and also through the cash modality by doing cash for health for emergency medical procedures and for safe deliveries for pregnant women, and then we also ran a multipurpose cash assistance programme for multiple years, where we found that the majority of the people spent their cash purely on rent, and basically for many people, it kind of felt like they had just arrived yesterday, even though they were there for five or six years, there were no opportunities for them to grow beyond that. So think of lack of access to legal documentation, or further employment opportunities. And that's also where the policy changes were most needed.

There were also-, yeah, lack of protective measures more broadly for-, because of the sole focus on providing people with cash but not with, you know, the autonomous and dignified ways to grow beyond that.

So just a brief overview of the programme that we ran. The reason that it was a pilot was because it combined the two modalities of cash assistance with case management for protection. We decided to run medium to long-term multipurpose cash assistance, to make sure that we move beyond the idea that a burst of cash for two months is enough. Cash not being an end in itself. We decided to run that parallel to case management focused on protection in the following sectors, in healthcare, mental health and psychosocial support, legal awareness and aid, education and shelter. So really here the multipurpose cash assistance is still very much needed, because people need to be able to pay their rent, or pay for healthcare, but using that as a basis-, as a building block for people to use for further opportunities for growth, that is autonomous and dignified. Through case management, we decided it would be much more beneficial to take our time to build better coping strategies together with these households, and to improve their decision making.

So, for example, if someone-, rather than incurring debt on paying rent and risking eviction, we could help through the multipurpose cash assistance for them to pay the rent, and then through the case management approach, help them to improve their coping, for example, taking a child back into school, or understanding their legal rights as a household.

So, as I mentioned, a lot of the work happens under coordination of UNHCR, which also has a vulnerability assessment mechanism that is used across the board by NGOs. And here we decided to add a few elements of our own to really target the most vulnerable households in the city. So we focused on female singled-headed households, households headed by someone living with disability or children who have disabilities, and people living with a range of negative coping mechanisms, like I mentioned child labour, having high debts, working illegally, relying on early or forced marriage, or even asking strangers for money. So these were the criteria we worked on. A scale, so a red, amber, green scale, with varying levels

of vulnerability, which also affected the timeframe of the multipurpose cash assistance, combined with case management.

Then-, I mean, dignity being the main focus of the multipurpose cash assistance and the case management, together with the case managers, the family really took ownership of their case plan, and the case manager was enabled not just to do direct intervention, and by that I mean providing parenting (p 29.80) skills, behaviour, change, communication, or giving information about services in the area, but also to establish referral mechanisms in each of those sectors.

Just a brief note on the state of this project at the moment. It began in early 2018 as a pilot to test the combination of multipurpose cash and case management together. And so the evidence, I've also left Medair since then, but the evidence that I will be offering here is kind of anecdotal, and also based on an interim report, but that can be made available after this presentation. So what we found is that access to healthcare and PSS still remain a serious, unmet need. Over 75% of adults in this programme were referred to PSS services, and there was also a very large element of integration in this programme to other health services run by Medair, so like the cash for health that I mentioned, or to other NGOs, and UNHCR.

Anecdotally, people have mentioned that the PSS element has really added capacity for them to cope with the trauma of war in Syria and the many years that they had spent struggling to make ends meet in Amman, and that it was a really-, like a missing piece of the puzzle for them, that remained kind of neglected for many years, of receiving cash assistance, but kind of being left alone to figure things out for themselves.

Another very clear, positive impact came from legal aid and awareness sessions that we ran with a large national NGO, who did legal awareness sessions and provided legal counsel for the families that we worked with. This element of programming really added some evidence, very strong economic and protection gains for the families that we worked with, so an immediate impact, for example, of having a rental agreement, understanding what the landlord needs to pay and what I need to pay would save people money, and they would be able to prioritise other basic needs and costs that come with that. And there was also a protective factor, where people could retain their shelter and avoid unnecessary or even unlawful evictions.

One of the learnings which was quite difficult, and where we had to redesign the programme a little bit from the start, was the realisation that multipurpose case and cash management together, it's quite predictable and logical actually, but we found that it was most effective among those who were more in the green and amber categories, because they were slightly less vulnerable, or at least that's how it came out in the scoring, and therefore they had some more of these building blocks to work with together with the case manager. Where it was more difficult for the most vulnerable, in the red category, was mostly the policy ceiling. That provided a real sort of dead end, where it was much more difficult to come up with creative solutions and to tap into these services that are available to people, because they are extra marginalised and vulnerable, and because simply policy does not allow for working in a particular sector, or for taking up employment opportunities, and even for non-Syrian refugees, for example, who largely, fall outside of the radar. It was extra difficult, so that's outside of this programme, to even be considered for some of these protection programmes. And that's also partially because of policy, and a focus on Syrian refugees and programming in Jordan more broadly.

Another lesson was to build in one-off emergency or contingency cash from the beginning, into the design of the programme. Because people need to be able to deal with the unexpected blows that meet them in life, and so being forced to go back to square one, just because I had to pay for a delivery, or because I got evicted, this part of the programme basically used multipurpose cash assistance as the

basis, case management as a way to improve coping mechanisms, and then emergency cash to deal with any unexpected obstacles.

Then the last and most important one is actually policy advocacy for protection programming, which seemed to not really be a priority for ministries who approve all NGO programming in Jordan. The need and healthcare was very clear, and many NGOs worked with MOUs, with the Ministry of Health for example, and that programming together, with cash assistance, was very popular, very well funded, but then there was a lesser inclination to fund and approve protection programming, and there was also a real need to do some advocacy with the National Aid Fund, for example, which is responsible for social protection for Jordanians, which was already overwhelmed itself and lacked capacities to provide social protection, for example, through case management, to Jordanians, and so that was taken up into our own programme, even though that was a protection concern that predated our intervention. And I'll touch on that in a minute in the next slide, please.

Okay, so some of the specific urban challenges that we faced was duplication and coordination issues at a national level, but specifically also in the big city, where people tended to fall through the cracks. There is a system with UNCHR where it doesn't allow for duplication of the exact same type of cash assistance, but still it tended to be that certain families or households would be prioritised due to their scoring. For multiple types of cash assistance, with different NGOs, whereas some had never, in those five, six, seven years, received a penny, and then were further and further removed from the services that are provided, and that's what I call this competition of vulnerability, where there are long waiting lists, and a focus on the most vulnerable, at the expense of others who are vulnerable, but in a different way, and where they just don't meet the increasingly stringent criteria for both cash programming and protection programming.

Then I just briefly mentioned this as well, the pre-existing protection concerns, and this is basically mostly for the vulnerable Jordanian households that we work with. The Jordanian population was-, the targeting happened through the Ministry of Social Development, and so those who, for example, did not have legal documentation, or were not on the waiting list of that ministry, also completely fell outside of the scope of this programming, and so the ones that we did work with, were basically just the backlog of the government and fell onto our shoulders to deal with. And often with the type of longstanding social issues and criminality that we did not expect that we would have to be dealing with.

As I mentioned, urban structures were overwhelmed, even for the host community. Just for the sake of time, the spatial dimensions I can answer as a question in the Q&A session, because this was a specific question as well, and then the final point about tapping into other services, really it was a challenge to go beyond referral. You know, when people are referred for other services that were provided outside of Medair, there tend to be long waiting lists and people would go into this big pool of referrals, but they still lacked the capacity to autonomously access solutions or services available to them, without the NGO acting as an intermediary. So service mapping was a huge element of setting up this programme to succeed, where people can independently go and demand access to their basic needs and rights without

the involvement of the NGO. So that even after case management ends, people can rely on their own-, on themselves to continue their growth and wellbeing. Thank you.

Leah Campbell: Great, well thank you again to both of you for such interesting presentations and contributions. We've already had quite a few questions coming in live. Keep sending in your questions everyone. We're going to start off looking at some questions that were submitted in advance, so the first question, which I'm going to turn to Haidi with first, is how can protection activities be linked to

more durable solutions in urban areas? And particularly, can humanitarians link their protection responses to existing government or civil society social services? So we'll turn first and hear from Haidi, and then also hear from Angela on this one. Okay, we might have lost Haidi temporarily, so we'll turn over to Angela, and hear from you Angela first before, and hopefully Haidi comes back.

Angela Cotroneo: Okay, sure, thanks Leah. I think I've already mentioned our consideration related to durable solution during the presentation. I mean, of course durable solution is a key dimension of protection, of displaced persons and generally, and it is so also in urban settings. Durable solution in urban settings, working for durable solution in urban settings require integrating the understanding that local integration is often the preferred options for urban IDPs. And this is important to keep in mind because authorities in the first place, but sometimes also humanitarian actors, end up having a sort of return biased approach to durable solutions. So it is important for humanitarians to be sure that we engage with authorities, so that they facilitate local integration, and avoid these bias towards return, because these could lead to-, I mean, people in cities want to locally integrate. They are missing support, and not being able to rebuild their lives, and thus being-, feeling direct or indirect pressure, to return to unsafe or premature circumstances.

Cities can also offer opportunities much more than rural settings of income generation, of employment. Of course it is important to work to ensure that people have the necessary valid documentations to access these opportunities, and have the adapted skills. So here, for example, when it comes to people who move from rural to urban settings, we need to keep in mind that they may not have the skill that can be immediately used in an urban setting, in order to access livelihood. And that's where humanitarians can, for example, intervene by trying to facilitate access to employment with vocational training, etc. And when it comes to linking our protection response to existing government or civil society, social services, I could make the example of-, for example what the ICRC did in Iraq, I mean, facilitating registration of vulnerable people, specifically it was single women heads of households, for state allowances. So you make the links with an existing government services that would be accessible only through payment of certain fees, and only for those who are aware of the existence of those services. So there is a whole work of awareness raising of existing services, information and support, for the most vulnerable, to be able to access those services. Over to you.

Leah Campbell: Great, thanks very much, Angela. I think we've got Haidi back on the line, so Haidi go ahead as well.

Haidi Sadik: Thank you. So, in terms of durable solutions, I think one of the main things that we focused on in this project as well, because at the time, the border between Jordan and Syria had opened, and there was this implicit push, not necessarily from the government, and definitely not from UNHCR and the NGO community, that it was okay for people to return, but there was also widespread recognition among the working groups and the coordinating bodies, that that is far from voluntary and dignified and

safe return. And so really, again, I point to advocacy and the relationship with the state, and the relevant institutions that decide on these things, to maximise the recognition of the state, of its role and responsibility to provide these durable solutions in the country, because even when people were asked what their intention was to return, it wasn't as high as was claimed to be, and people were still looking for basic means of survival in the host community, to basic services in a non-discriminatory way, so even those basics in Jordan were far from being met.

But that said, we still had a few voluntary returns among our households as well, who had come back to South Syria, and then our role in that, as a protection programming, was to really improve the

awareness of rights, and the information. And so, for example, what is the necessary paperwork that you need to have in order. If you do decide to return and to really try and incorporate the support and the coordination of all other partners in that to make sure that we're all on the same page, and sending the right messaging, protection messaging around returns, if that is chosen by the people that we work with.

Leah Campbell: Great, thanks so much Haidi. I'm going to turn back to you for the next question as well, because it really relates to what you were talking about in terms of the use of cash. Especially in the Amman context, but also more and more all over the world, cash and multipurpose cash is being used, and so one of the questions we have relates to, does the use of multipurpose cash bring with it particular protection risks, and if so, how do we overcome those?

Haidi Sadik: Yeah, thank you for that question. So just as any other humanitarian intervention, multipurpose cash assistance also brings risks in-, like the modality that is used, and in the delivery, and obviously cash in Afghanistan is completely different than cash in Jordan, where it is operating under a fairly predictable system, where UNCHR had made an agreement with banks and people very safely go, and through an iris scan can retrieve the cash from an ATM. But still, there is always a risk when there is increased access to a predictable flow of cash, that makes people vulnerable to theft, of which we had a few cases as well. Then there's also the risk of disturbing the power balance in a home, or a household, where, for example, if you-, like who is the person who is physically taking the cash, who is making the decisions about spending the money, and who could potentially be denying access to this money from other people in the household hold who are affected?

And one very difficult example, where coordination comes in again, in Jordan, or in Amman, was where multiple families who are from the same city, for example, would share a flat to save costs, and then due to coordination problems, they would only receive cash assistance as one household, and then there would be this protection concern about this money will not be enough for this number of people, because they're technically multiple households, and what can that do to their dynamics, especially, for example, if it was a female single headed household, sharing with another family where there were men, for example.

There are also data protection risks, so even with the iris scans, there are-, if people could not, for some reason, take cash through their iris, because of eye problems, people had ATM cards, and there is a data element there to bear in mind as well.

The way to mitigate these risks, I suppose, is for cash and protection teams to work very closely together, from assessment to design, to monitoring or post-distribution monitoring, to really understand what the implications are of giving cash assistance, and how the cash is used. Yeah. So designing explicitly standalone protection activities alongside a multipurpose cash assistance, is a very important way to

mitigate these risks. And also designing a system of accountability, so training your staff on child protection and prevention of sexual exploitation and abuse, and also seeking accountability from third parties, if they're not banks, but like third parties or middle men who are responsible for distributing cash in more volatile or conflict affected areas would also be one way to mitigate these protection risks.

Leah Campbell: Great, thanks very much. A few of the questions that have come in in advance, also focus on relationship with government institutions, and obviously in urban areas, we have a much stronger presence of various levels of government, which is one of the things that we always talk about

in terms of urban areas. And so one of the questions is a bit broader, and it's how does the influence and existence of government institutions in the city affect how we address protection, and what kind of changes to the dynamic does this cause, and then in particular, what about in the context of interaction with local authorities or national authorities who might be present in this city, and leading response or co-leading response in an urban area, who perhaps have different ideas around what response should look like, and perhaps might not be in favour of some of the things that fall within protection activities. So how to kind of navigate those challenges that relate to the existence to the existence of an interaction with government authorities.

Again, I'll turn to both of you, starting with Angela.

Angela Cotroneo: Thanks, Leah, for the question. I think that definitely, the fact that authorities are more present in urban areas, create opportunities. I mean, we all know that authorities are those who have the responsibility to protect people, particularly, I mean, to protect and assist internally displaced people, to work, for them to achieve durable solutions.

So, they must be in the driving seat of the response, the fact that they are there, that they are present, and that they are willing to have an influence is positive. Of course, it comes with challenges, as you were also hinting. The first one is there is more control and regulations, than for example, humanitarian acts, as I used to, when working in rural areas. They need also to be more conversant with complex legislative frameworks, and most importantly, the fact that we are facing a multiplicity of authorities. We may not-, whose division of responsibility may not always be clear, so I think that one of the challenges is to identify those-, interlock those authorities with whom we need to engage regularly, because I mean, dialogue with them is the most beneficial for the protection of civilians in that situation.

And the key is, of course, to try and engage them in a constructive manner. Of course, they may have different opinions, in terms of what may or may not be needed, but I mean, the experience of the ICRC, what it (? 49.34) try to really understand the interest that are-, and also the motivations, and trying to facilitate a dialogue that is based on sharing of experiences from other context, facilitating forums for peer-to-peer exchanges with other municipal authorities in other context, because this may indeed trigger a more positive dynamic of conversation (? 50.09). It's sort of a peer-to-peer pressure that may help in overcoming some of the initial difficulties in dealing with issues such as-, I mean, durable solutions as we said, and other issues related to protection in urban settings.

I know that Haidi also wanted to also compliment on this.

Leah Campbell: Great, yes, thanks. We'll turn over to Haidi as well on this question.

Haidi Sadik: Thank you. So just more broadly, I guess the stronger influence of government institutions in urban settings is a real advantage that we can use to build capacity, to support in priority setting,

coordination, streamlining at national level, and really strengthening, I guess, the relationship between the public and the private services that are available to displace populations, and the host community. But I guess also integration comes with risks, because what do you do when the local authority, or decentralised authority that is responsible for family protection or child protection has a different vision? What if they're punitive, or under a military body? Does that align with your type of programming, and what are the gaps that then need to be filled, and do we have the resources and the time to build capacity and kind of-, yeah, this topic came up a lot in the humanitarian development nexus, and kind of handing over slowly but surely to national NGOs and national authorities, but it was

found that actually the gap is still far too large, like I mentioned, because, for example, in the Jordan setting, even for Jordanians, those government institutions were overwhelmed, and so it would fall on NGOs to find the resources to build capacity first, and then to be able to handover some of this work in a productive manner.

I think that's all for me on this question.

Leah Campbell: Great, thank you both so much. The next question relates to working in context where there is urban violence, and so particularly given Angela, the case study example from Honduras, I'll turn to you with this one. Do you have any best practice or advice to suggest around operating in urban context where access is limited by criminal violence, and especially, how do you strengthen protection spaces for particular vulnerable groups, children, young people and women, within high-risk communities, that are affected by things like gang violence?

Angela Cotroneo: Thanks Leah. So I think that already during my presentation I mentioned some of the learnings from the experience in Honduras, as well as El Salvador. I mean, I think that when it comes to operating in context where, I mean, urban violence, the present of gangs, creates problems in terms of access, but also as I was saying, in terms of security and very, very serious do no harm constraints, I think that definitely, the fact of being able to rely on trusted local actors as entry point, and as I was saying, to create a system for referral of cases, and also support, it's key. I mean, the experience of the ISSC, the fact of being able to count on the National Red Cross Society for example, but also linking up to different social-, civil society organisations, based on an understanding of what we can-, we are able and ready to do, and what other people can contribute, can be of enormous help in both identifying cases of vulnerable IDPs that need specific and immediate support, and in making sure that the multiple needs of these people can be met, and definitely, I mean, the children, youth, women, they appear to be particularly vulnerable in this context. In Honduras, for example, they're definitely among the most vulnerable to displacement, so it's particularly important to inject age considerations, gender considerations, in the way we try to approach people and engage with them, and especially in considerations related to defining a response that is tailored to their needs.

For example, in Honduras, more and more dealing with cases of teenagers, I mean, young, especially young boys, who are sometimes compelled to become displaced because of risk of forced recruitment, and then they find themselves in a particular vulnerable situations, because they are-, I mean, they are separated with the rest of the family, and dignity for them also means being able to offer to them opportunities in order for them to continue their education, vocational training, to rebuild their lives also as much as possible.

I think I was quite impressed, in fact, if I may expand a bit on this by the fact that, when hearing the presentation by Haidi, really what comes out is the importance of dignity and the importance of looking at this interconnection between economic needs, psycho-social support needs, and protection, because this is all linked and the holistic response to all of those needs is what we need to really ensure the best protection to these people.

Leah Campbell: Great, thanks so much, Angela. Coming back to something that you raised in your presentation, Haidi, you talked a bit about the spatial dimensions to protection. This is one of the questions that came in in advance, and we've also had a related question come in live, so I'm going to blend them together. Can you talk a bit about both the spatial dimensions to protection in urban areas, and also in particular related to analysis? Do you find value in geospatial analysis for protection, and

related to that, are there other sorts of data or analysis that you found particularly useful for doing protection work in urban areas? Over to you, Haidi.

Haidi Sadik: Thank you very much. This is a super interesting question. Yeah, the spatial dimension was really a constant throughout this particular programme, and I think some of this will apply more broadly, or universally as well. The first was that proximity to service does not equal knowledge of those services and access to those services. So really there was a gap that could not simply be filled by having those services available. Really, the unique relationship between the case manager and the households and the individuals in those households provided space for that complexity to come through, because even if there is a service near to you, what makes it so that you cannot access it, or that you feel you cannot access it? And these were things that came out that had a little bit to do with the spatial dimension, but also with the individual circumstances of protection risks, which I found very interesting.

Another one is coordination efforts that are obviously influenced by spatial factors. So the division of an urban setting, into various administrative areas. How does that affect people's access, and how does that affect how we are able to do our work with them? So there was an attempt, or various attempts to create a robust mechanism, actually based on geo's (ph 01.01.15) spatial analysis and sort of geo-mapping of services available, but that still lacked an indication of whether services were delivered, or in fact reliable, and who they were available to, and so there were still many question marks around existing service maps in Amman, and beyond in Jordan, which is also an interesting factor that we felt through our programme, we had to compliment through our own service mapping, and also building on the knowledge of the people themselves who often have complimentary facts to our own, and we really learned a lot from that.

Difficulties in accessing certain populations that are mobile or for example, who live in informal tented settlements, also affected our ability to deliver high-quality protection services. People, for example, who live between a camp and a home in Amman, or who frequently had to go back to sort out some paperwork with UNHCR, or visit a sick family member in the camp, made it a little bit less predictable, when we could do a home visit and the kind of follow up on this protection case management.

The physical makeup of the city as well, it's quite hilly, there are a lot of stairs, and so working with people with physical disabilities also meant that we had to try and come up with creative ideas in how they could access services, because if a child who is disabled and has difficulties walking up and down the stairs to get to school, and also the family does not have money to get a school bus, then you're stuck, right? And so these are spatial factors that influence the case plan and the priorities that come up in that, together with the families, which we couldn't have predicted if we had made it independently in the office.

Yeah, so the learning here for us was understanding the spaces that people move in, and then making a very conscious effort to map that, and to share that back to people, for them to use independently. Because cash assistance and case management was not going to last forever, and they would have to find means to independently search for and seek access to other services.

A final note was also access to areas that were known for criminal gangs or clan violence where it was even sometimes impossible for us to go in and do assessment in the first place, let alone do case management with them, and so that was one of the more difficult barriers to our work. Where we had to hand that over to local services, government services. I hope that helps, thank you.

Leah Campbell: Thanks, Haidi. The next question we'll turn to Angela. Do you have any thoughts about what's better or what's more appropriate for urban context in terms of whether it's standalone protection programming, or mainstreaming protection across all sorts of programming?

Angela Cotroneo: Thanks, Leah. Well I think that you need both actually, so there's not really one that is better than the other. Definitely, they are specific protection concerns, affected people in urban areas, and in particular, because I mean, I'm speaking from an internal displacement perspective, affecting IDPs in urban settings, that do require specific protection responses. I mean, when you deal with problems related to-, I mean, obstructive return, forced return, and durable solutions in general, targeted threats, problems as (? 01.02.59)-, I mean, you need specific protection responses. At the same time, I think that what has been said so far, both from myself and also very clearly from Haidi, you need to always keep protection in mind, also when you put in place other types of programmes, and the do no harm consideration, particularly as I was emphasising in situations of-, I mean, in cities affected by urban violence must inform each and every phase of the response from the identification of people, I mean, engaging with people, defining the response, implementing it, etc.

That's because, I mean, dignity and protection are also a result of, as we were saying, being able to access these services and being able to find out autonomy, and to be able to normalise one situation. So it's much beyond, of course, physical safety and security. So I think definitely that both are a must, and I would say probably not only-, this is probably not only for urban settings, but for protection responses in general.

Leah Campbell: Great, thanks very much, Angela. Haidi, another question for you, this one going back to cash programming in particular. We've had a few different questions come in around the risks around cash, in particular, a couple of different things, one potentially being extortion, and potentially being in an urban area, where activities are more visible, people might know where an organisation's office is, or be able to follow movements because there's patterns that they can observe. Are there risks related to cash programming in urban areas? And related potential risk, is the existence of an extremely vulnerable population potentially in the urban area, who might be quite desperate for support and might try to access the support, when they might not be the ones who the aid is targeted to, and how you kind of address that?

So, really around kind of the risks of cash in an urban area.

Haidi Sadik: Thank you for that question. I'm assuming the question goes beyond the risks that I mentioned earlier, in the modality, but there was still the question about the risk of extortion. I mean, this is why case management was such an important thing, because that bridges that gap between simply just, for lack of a better expression, throwing money at someone and then not understanding how that

affects that individual or that individual household further, their lives and their protection risk, and to make sure that it actually isn't doing any harm. And so through the case management, there is this intimate knowledge of this family is going to spend the money in this way. This family has a particular relationship with someone else, who they owe money, and therefore it is a risk that once it's known that they are receiving cash, or even towards a landlord, what they might do to them, and how they might extort them for further money.

So it was also always a case to case decision of whether providing cash assistance is actually safe for a family, and also helping them as much as possible, to have the means to mitigate those risks. So for example, if you owe someone money, do we need to put that as step one in the case plan to make sure

that once that is settled, you can start then using this money for your own priorities that will not pose a risk to you, but will actually help you cope better with your current situation?

I hope that answers that side of the question. Where, in urban areas, activities are more visible, that was very clear in the context we were working in as well, with many, many NGOs, active, and almost all of them providing cash transfer programming. The demand is very, very high, and people's requests for cash assistance were never ending, and first and foremost, actually UNHCR would be receiving those requests and then refer forward to other NGOs whose response, unfortunately, was to make the entry criteria, or the threshold for providing cash, much more stringent, basically to be able to-, because you can't meet the whole demand, there are hundreds of thousands of people in need of cash assistance, and therefore the entry point became those most vulnerable who not only cannot pay their rent, but also have a child in labour-, child labour case, very high debt, and a medical concern, a disability, a single-headed household, and you can even see that reflected in our programme, because it was also a relatively small number of households, where it simply is not possible to absorb everyone into that. And that includes the host community as well.

And I mean the answer is kind of in the question in that one, where the vulnerable local population will also try to be included, and I would say that's a good thing, and it's a good thing that in programming with refugees, that the host community is also explicitly included, and that's incorporated in policy. So any NGO wanting to do a programme in this specific setting, would have to also incorporate the host community, and I think that's a good way of mitigating the risk that you provide a certain service, or do an intervention completely side-lining other people who a very, legitimately in need as well.

Leah Campbell: Great, thanks Haidi, and we might come back to a further cash question in a moment. Angela, earlier in the webinar, you talked a bit about the opportunities that can come from working in urban areas, and I wondered if you could just expand on this a little bit.

Angela Cotroneo: Thanks, Leah. Do you mean opportunities for the people who are trying to find refuge in urban areas, or also opportunities for humanitarians who are working in urban areas?

Leah Campbell: I think possibly both, I mean, I guess-,

Angela Cotroneo: Okay, perfect. Yeah, I mean, let me start by recalling that during the study that-, during the case studies that were the basis of the report that we published last year, I mean, talking to the people who are displaced, that were displaced in those urban settings, outside camps, it was clear that they had left the city, not only, I mean, of course to find protection, to find safety, for example, from military

operations, but also because of the opportunity that a city may offer than rural settings, in terms of access to services, in terms of access to employment opportunities too.

Now, the problem is also that these opportunities can be taken advantage of if people have the right skills, and if people have the document also to-, the official documentation in order to apply, for example, for a job, or for to be able to register to school, or to be able to access medical treatment. So in this regard, as I was mentioning also before, it is really important to ensure that we try to-, in defining our response, we try to also, I mean, include interventions that may help specifically and particularly vulnerable IDPs to have access to those opportunities.

I'd like to describe, for example, if I have time, tell me if the time is not enough, please, but very briefly, a project that the ISSC implemented in Colombia on access to employment for IDPs in urban settings.

This is a project that was based on a-, access to employment was guaranteed by partnership with a private and semi-private company, so it was about putting these people in contact with different companies, with potential employers. At the same time, also offering vocational training, building their soft skills, because we were talking in the majority of people who had left from very remote areas in the countryside, in Colombia, and had arrived in Bogota, Medellin (ph 01.12.37), Bucaramanga, and all these had a very positive effect in terms of allowing people to have an easier access to employment, to also, if you like, break the isolation, because of course, cities are an environment where social cohesion is less than in rural settings, and may be difficult for newcomers to establish links.

I mean, IDPs suffer from-, may suffer from the lack of social support and social networks. So that was a very interesting type of interventions that managed to both address the issue of access to livelihood, but also to allow people to establish social linkages and this also favoured the efforts to rebuild and to normalise their situation.

And of course, I mean, for humanitarian actors, there are more opportunities in urban settings, particularly because there are more actors that are present. And these of course, I mean, Haidi was also mentioning difficulties in coordination, trying to avoid duplication, but being able to count on a web of different actors is of course key, because the needs that need to be responded to are multifaceted, and it is important to be able to count on the different roles that each and every actor can play. I don't know if that can be enough?

Leah Campbell: Great, no, that's really helpful. Thanks Angela. Okay, I'm going to turn first to Haidi, and then maybe come back to Angela, if you have some thoughts on this one. The question relates to the challenges that might be faced when you implement mental health psycho-social support with IDP populations in particular, and whether this differs at all in urban settings or not. So over to you, Haidi.

Haidi Sadik: Sorry, my answer would mostly not be about IDPs, but based on the experience in Jordan, and so the question is, if it's different in urban settings to provide MHPSS programming? Is that correct?

Leah Campbell: Yeah, so I guess overall, what are the challenges that you might face implementing mental health psycho-social support services with, I guess, displaced populations more broadly then, and if there's anything particular different about doing that in urban areas.

Haidi Sadik: From my experience, there was nothing specifically about the urban setting that made that unique or different. But more broadly, like I mentioned, it was identified as one of the major gaps that had largely gone unattended for many, many years, for people who were living in that same urban setting.

And so that also links to my comment earlier, that just the mere presence of services does not mean that people will take them up, does not know people know it exists and does not know people understand what impact it could have on their lives.

A large part of what we did was just to even raise awareness about what it means, and also to kind of raise the alarm about the need, because assessment, it came out that the vast majority of people that we work with, both adults and children, were not just assessed by us as being in need of PSS, but had voluntarily indicated their willingness to take part in PSS sessions, and the ones I specifically mean are group PSS sessions, where we referred almost more than three quarters of our adults, and then a large proportion of the children that we worked with, to another national NGO. Which worked throughout the nation, but this is probably one urban element that makes it easier for people to access these services, where they had a walk-in centre for children to do PSS services. So it might be the case in

other cities or in other places, where the urban setting provides more accessible PSS services, but I think for us at Medair in Jordan, the biggest obstacle was actually responding to the vast need that is there, and also to raise awareness among the people that this is something that is immediately available to you, that might have a very large impact for you, and protection gains as well.

Leah Campbell: Great, thanks, Haidi. Angela, did you want to add to this one as well? Anything that you've faced as a kind of challenge with mental health support for displaced people?

Angela Cotroneo: Thanks, Leah. Maybe just a few words. I'm not an HMPSS expert, but I can definitely support also the remarks, the comments that Haidi just made, in the sense that definitely the sheer scale of needs, of HMPSS needs can be one of the challenges. I mean, I remember being in Mosul and speaking with different peoples, and each and every of them had been profoundly traumatised by the experience of the war, and each and every of them be the IDPs, returnees, resident, former-IDPs, now residents, were hosting IDPs. I mean, everybody was in need of some support, and when you get at those proportion, then it's the entire social fabric that needs to be rebuilt.

It's also true that in cities maybe more than in other types of settings, indeed you can have more actors that are able to provide the services, which can be in the positive side. From my side, maybe more than discussing the challenges, what I like is to emphasis, for example, for our experience in Honduras or in El Salvador, so in context of cities affected by urban violence, I mean, our experience is really that A, HMPSS support is definitely an essential component of the response, and saying that it is part of the efforts to ensure protection in the longer term. People have gone through such traumatic experiences, talking about people who have been targeted by-, have been victims of targeted violence from disappearance of family members, to sexual violence, etc., and without this type of support, they will never be able, one, in the immediate moment after the displacement to decide about what to do with their lives, and to take the best decisions for themselves, despite the circumstances. And second, I mean, in the longer-term, they won't be able to have that state of mind that is necessary for them to resort their autonomy, to rebuild a normal life, and to access durable solutions.

Leah Campbell: Great, thanks so much, Angela. So we've got five minutes left, so I'm going to ask each of our speakers one final question, and then we'll come to an end. For Haidi, a couple of follow-ups have come in, just from some of the things that you shared earlier. The first part is, can you give us a bit of a 101 definition of case management, and can you also expand a bit on what you said earlier about competing vulnerabilities.

Haidi Sadik: Yes, thank you for both these questions. The first, on what is case management. Much like cash transfer programming, it is not a standalone type of programme or assistance, but it's a modality. So case management is a way of organising your work with an individual, so for example, a child in child protection programming, or with a household, like in this project that I presented, to achieve goals that are set by the person of concern themselves, also with dignity. So it's a modality, not a sector. And that is the one major 101 thing to walk away with, that it's a modality, not a sector.

And so case management, traditionally also used in social work, follows a plan or a pathway if you will. The first is to identify and register people that might be eligible for general programming, which in our case, was multisectoral. So it was not a case management programme, but it was a social protection programming, that had different sectors. The second step in this pathway, is to assess the needs of the individuals, or the families that you are working with. The third, and the most crucial one, is to then develop an individual case plan, and that is done by-, in complete ownership, by the person of concern.

So you don't walk into a household and say, "I see that you cannot pay your rent, and therefore number one is to pay your rent." Because they might say, "Actually, I'm pregnant and I'm due to deliver in a month, and that is my priority concern at the moment, which will come before even the roof over my head." So it's really listening to the needs of an individual person of concern, and letting them lead the way and take the ownership. So that when you leave and you pull out with this plan, they can continue to adopt the tools you've given them.

And so in case management, it is very important that there is direct intervention, a direct action that I mentioned earlier, where the case manager sits down with the family, making it also accessible to people who otherwise would have needed to leave their house to access a service, like people with disabilities or elderly people, you go to them, where they are in their home, and you give them the tools and skills to make better decisions for themselves and their children. So that's the case plan.

Then step four is it start it and implement it. Step five is to follow-up on this case plan and review it and reiterate it as you go, and usually that is most effective after a couple of months. And then step six, which is the closure of the case, which might even be-, closing the case does not mean that all the objectives have been met, it just means that you're confident now to leave them to do it on their own. I hope that answers the 'what is case management' question.

And then to explain what I meant by competing vulnerabilities, or competing for vulnerability, as I mentioned, the NGO response to the vast need, or demand, and the limited supply of cash assistance, and programming in general in that context, was to make the criteria for absorption of people into programming very, very strict, and very complex. And so the threshold to become a beneficiary of a programme, was insane. So someone needed to have so many different vulnerabilities, and so many different compounded issues happening in their life, to be eligible to a programme, and that does not mean that people who do not score four in the UNHCR vulnerability assessment framework are not vulnerable, it just means that they are not likely to be provided with services as quickly as others.

And so if your programming is specifically focused on healthcare, then people with healthcare needs will be more likely to be absorbed, but in a programme that is quite broad, that says, 'I will give you unconditional cash to do with whatever you please', then it becomes more difficult to-, so it's a coordination issue at the end of the day. It becomes more difficult to prioritise certain types of money, or resources, for certain types of vulnerability.

If that does not make sense, please let me know.

Leah Campbell: No, that's great. Thanks, Haidi. So finally, we'll just turn to Angela with a final question about how-, especially when we're talking about durable solutions, how we take into consideration the high burden that the host community might be experiencing because of the presence of displaced people, having to share scarce resources, the potential for conflict and even resentment that host communities might have for displaced people. So how we manage those tensions in the context of urban protection programming. Thanks, Angela.

Angela Cotroneo: Thank you very much for the question, Leah. Indeed I feel that it's important to also spend some words on the perspective of host communities, and as you said, I mean, very often host communities are the very first responders, and often also the only responders, because I mean, for IDPs who settle outside of camps, they don't receive often support, or sufficient support by humanitarian actors or authorities alike. So I think, first of all, what is important to keep in mind is that yeah, in order to avoid those tensions, I mean, it is important to make sure that those needs that

are shared by both host communities and IDPs are also addressed, and that, I mean, if in a city like Maiduguri, the population has become double or triple after the large influx of IDPs for the (? 01.27.12) then you need to make sure that the services and the infrastructures in the community are supported, rehabilitated, in order for them to be able to respond to the increased demand.

It is essential of course to also make sure that once decisions to whom to prioritise in certain responses are taken, that criteria are explained that not only IDPs but also host communities are-, have the possibility to take part in the analysis and in the definition of responses. I mean, from the part of the ISSC, we don't experience so much, this risk in the sense that we are not a displacement organisation, so our mandate covers broadly all civilians that are affected in situations of armed conflict or violence, so we try to assist and to protect based on needs and not based on the displacement situation in which people may find themselves. But of course, what we also see is that IDPs very often have specific vulnerabilities. That said, I mean, host communities also need to be looked at, and sometimes blanket responses are useful. It's not that they are-, when I said that one of the shortcomings of the responses is blanket programming, it's not that these responses, blanket responses that address the needs of host communities and IDPs are wrong. On the contrary, as I was saying, rehabilitating services, making sure that host communities are supported in their efforts to facilitate integration of IDPs is key. What is important is that both the specific needs of IDPs, and now the vulnerable population, and these shared needs are addressed as much as possible.

Leah Campbell: Great, thank you so much Angela, and thank you to both you and Haidi, for sharing with us all of these experiences, and answering so many questions today. Thanks as well to the majority of you who have stayed with us, even though we've run five minutes over the webinar, so thanks very much for your time. Thanks as well to Grace and Cara here with me from ALNAP. As I mentioned at the start, please do fill the survey out that's going to pop up on your screen when we end the webinar. It's really important that we get your thoughts. Hopefully the fact you stayed with us indicates that you really enjoyed and got out of the webinar, and we look forward to seeing you on the next ALNAP urban webinar. Thanks again so much everyone, and have a great rest of your day.