

Evaluation of DG ECHO's Actions in the Democratic Republic of the Congo

October 2010

Final Report



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**Paul Bonard
Ricardo Solé
Silvia Hidalgo
Soledad Posada**

*This evaluation was budgeted to cost € 113.704 (0.23 % of the estimated value of the decisions evaluated).
This report has been financed by and produced at the request of the European Commission. The comments contained
herein reflect the opinions of the consultants only.*

Contract N°: ECHO/ADM/BUD/2010/01205

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Acknowledgments

DARA is grateful to DG ECHO staff in Brussels and DRC whose efforts significantly facilitated the evaluation. We appreciated the level of commitment and professionalism of staff and the opportunity to share views with TAs and María Palacios and Nicoletta Pergolizzi from the evaluation sector.

We are grateful to the people from DRC for the time they have dedicated to the mission team to share their views and explain the problems they face.

Our thanks also go to all NGOs and UN agency partners who not only provided support to the evaluation but openly shared their experiences, achievements, views and operational issues of concern.

Executive Summary

1. The purpose of this evaluation is to assess the relevance of DG ECHO actions in the Democratic Republic of the Congo (DRC), as well as their effectiveness and impact. Recognising the importance of protection in humanitarian action and specifically in the DRC context, the evaluation also aims to offer recommendations for the 2011 ECHO strategy on protection actions in DRC.
2. Although protection is presently recognised as the first priority in DRC, the overall response from the international community, despite its scale, is far from responding to the magnitude of the needs. Notwithstanding the efforts for the stabilisation of the situation in eastern DRC, the civilian population will undoubtedly continue to be victim to severe and widespread violations for years to come, at least until the Forces Armées de la République Démocratique du Congo (FARDC) and the Congolese National Police (PNC) can shift their role from being the main predators against their own population to a competent and effective protecting force.
3. The overarching recommendation of this evaluation is that DG ECHO is encouraged to further develop and streamline its protection policy, on the basis of additional efforts. This policy should be articulated around three major axes: a) the exploration of further possibilities for mainstreaming protection components in assistance projects; b) the exploration of possibilities for further increasing or diversifying protection projects; c) the continuation and deepening of DG ECHO's involvement in issues of coordination of protection.
 - A. ***DG ECHO is encouraged to further develop and streamline a coherent protection policy on the basis of the Funding Guidelines on Humanitarian Protection (FGHP).***
4. The evaluation takes into account DG ECHO's **positive achievements** in DRC in the field of protection.
5. DG ECHO contributes substantially to protection efforts in DRC through its consistent and regular **support to the main agencies undertaking protection** (UNHCR, ICRC, UNICEF and OCHA). The detailed review of projects carried out by other partners in protection also shows the overall concern of DG ECHO for protection.
6. DG ECHO has pursued the policy of encouraging partners to develop projects in areas difficult to access and, as a consequence, more than half of DG ECHO's assistance projects include a potential component of **protection by presence** in such cut-off/isolated areas. This policy is relevant not only because it allows aid to reach populations generally in dire need of assistance, but also because the simple presence and activities of project staff in these areas can decrease tensions between these populations and armed forces or groups. **ECHO flights** are very relevant for seeking to further extend the geographical coverage of these activities and should be continued with the same objective. Components of projects aiming for the **rehabilitation or construction of landing sites or access roads** are also very positive, as they contribute to the overall objective of protection by presence. Roads have a very significant protection effect, as their rehabilitation facilitates the escape of populations that are victims of attacks, allows them to access basic social services in neighbouring areas and also facilitates the access of humanitarian partners.

7. DG ECHO has been significantly involved in the funding of projects against Sexual Gender-Based Violence (SGBV)¹ providing assistance to victims. Access and adequacy of services related to institutional weaknesses and stigmatization aspects remain a concern. Furthermore, the heavy focus on attention to sexual violence affecting women seems problematic, as it diverts attention from a more comprehensive gender-oriented approach. Beneficiaries and agencies already seem to be engaging in opportunistic behaviour, and income earning strategies seem to take advantage of the pre-eminence given to the response to SGBV. The DG ECHO approach of favouring the case management of victims through the health system's institutional strengthening is adequate and should be pursued.
8. DG ECHO's recent initiative of examining the **funding of coordination efforts** in protection is extremely opportune and exemplifies the new orientations that it intends to follow in this field.
9. DG ECHO has recently established solid **foundations for the development of a coherent policy** on protection by adopting its **Funding Guidelines on Humanitarian Protection** (FGHP). This document fills a gap within the DG ECHO policy. The FGHP can however be further refined and streamlined in order for these to be operationalised.

B. *DG ECHO is encouraged to diversify the type and focus of protection projects and to increase their number.*

10. The evaluation also found that **DG ECHO could expand its protection activities** in a number of sub-sectors that have been insufficiently explored.
11. The current transitional situation in eastern DRC requires significant effort in the field of **mediation on land and reconciliation**. Although these are meant to be long term activities, expertise has been developed by some partners in activities of emergency mediation on land and of early reconciliation, which are paramount for the success of IDP return and the repatriation of refugees in a part of the world which is extremely sensitive to land and/or ethnic tensions.
12. DG ECHO should also consider increasing its involvement in **prevention activities** such as early warning, training, dissemination or community-based protection projects. These are projects which are fully part of protection, even if impact and results are more difficult to measure in this field.
13. Priority beneficiaries of protection activities, in terms of number of violations, should be the **individuals arbitrarily arrested and detained**. The response of the international community to these needs and in particular, what DG ECHO has been funding so far, appears to be insufficient. Although DG ECHO may rightly question funding such activities in light of its current focus and partner's capacity, an exchange of views with other EC or EU services would be quite beneficial in an attempt to tackle this issue. Similarly, increased involvement of DG ECHO in **child protection** activities in might be welcome in an area which appeared to be underfunded at the time of this evaluation.

C. *DG ECHO is encouraged to improve the effectiveness and efficiency of its protection projects.*

¹ The term "sexual and other forms of gender-based violence" comprises not only rape and attempted rape, but also sexual abuse, sexual exploitation, forced early marriage, domestic violence, marital rape, trafficking and female genital mutilation.

14. Although DG ECHO demonstrates a strong interest in protection in support documents, coverage of protection in its **annual Global Plans (GPs) is limited**. DG ECHO should, therefore, consider including a standard section on protection in these GPs, in order to better address protection issues and should consider increasing the number of related activities and objectives to be introduced.
15. Given the need for increased training and reference in the field of protection, DG ECHO is encouraged to develop a more coherent approach on protection issues. This should start with the establishment of a more comprehensive **centre of expertise** in protection, including a protection specialist within the policy unit and a sector expert on protection at the Regional Support Office (RSO) level. The second element of this approach should consist in the response to the demand of Technical Assistants (TAs) and other staff for **increased training** in the field of protection.
16. Effectiveness of the protection component of DG ECHO's SGBV project could be further improved, especially in respect to the adequacy and quality of services offered. The evaluation suggests exploring a better integration of reproductive health services, including outreach services, in order to offer more attractive services to victims and persons at risk, while developing a wider angle of mental health programs including overall victims of violence. Support for reintegration and livelihoods should be extended to indirect victims of SGBV like men, children and witnesses.

D. DG ECHO is encouraged to further mainstream the crosscutting issues of protection in assistance projects.

17. With the exception of projects implemented by the three protection mandated agencies, partner projects did not appear to deal specifically with the **monitoring and reporting** of violations or abuse against civilians, at least not in a formally expressed manner, in the results framework of the projects. DG ECHO is therefore encouraged to fund such components if the concerned partners have developed, or are about to develop, an expertise in protection. This component would, in principle, not include activities of direct advocacy. They could be qualified as **“soft monitoring”** activities in the sense that the monitoring would be aimed at the analysis of protection patterns (number and type of violations) and not at documentation of individual incidents. Violation reports would be directed to the protection cluster which would play a key role in joint advocacy.
18. Some progress should also be made in the implementation of the **“do no harm”** principle. Although “do no harm” remains a constant concern for humanitarian players in eastern DRC, very few of them are able to demonstrate a systematic establishment and implementation of precautionary measures such as pre- or post-action assessments, to identify the risks and the measures to be taken in avoiding these risks. Therefore, DG ECHO should consider further integrating “do no harm” as part of its current project review procedures.

E. DG ECHO is encouraged to continue providing support to the coordination of protection and to increase the connectedness of its protection activities.

19. DG ECHO's recent initiative of examining the **funding of coordination efforts** in protection is extremely opportune. The protection cluster is still quite “young” as an institution, and the diverse difficulties which it confront do not diminish the need to support it as a key platform to enable increased protection for civilians. Most importantly, the cluster serves as main forum for information exchange between the humanitarian and human rights players and the United Nations Mission in the Democratic Republic of the Congo (MONUC) military and police, which play a crucial role in

protection in DRC. Therefore, DG ECHO’s initiative to fund Oxfam as the co-lead of the cluster in close co-ordination with UNHCR should help improve the effectiveness of the cluster.

20. DG ECHO’s actions are aligned with the **Humanitarian Action Plan (HAP)**. The current protection architecture is in flux. DG ECHO needs to closely follow the implementation of the transition plans for eastern DRC such as the Stabilization and Reconstruction of Former Armed Conflict Areas in Eastern Congo (STAREC) and the International Security and Stabilization Support Strategy (I-SSSS), jointly with other donors, given the importance of protection issues in these plans.
21. DG ECHO is also encouraged, notably through the establishment of a centre of expertise on protection, to **increase exchanges of views on protection with other donors**. This should be done at Headquarters (HQ) and field level, particularly with donors that, such as DFID, are more specifically involved in protection issues.
22. Throughout this evaluation, protection appeared to be a very significant transition topic. Therefore, DG ECHO and other EC-EU services are encouraged to increase their interactions on such issues in the coming years, particularly in regard to **emergency mediation on land, early reconciliation** processes, monitoring of FARDC and PNC abuses, protection of persons arbitrarily detained and reintegration of Children Associated with Forces and Armed Groups (CAFGAs) into civil life.

Matrix of main findings, operational and strategic recommendations ²		
Main conclusions	Operational recommendations	Addressed to
A. Further develop and streamline a coherent protection policy on the basis of the Funding Guidelines on Humanitarian Protection (FGHP)		
II.2. Protection is widely recognised as the main humanitarian need in DRC. The present overall protection response is considered to be insufficient.	II.1. DG ECHO is encouraged to further develop and streamline a coherent protection policy for DRC (cf. para 44).	DG ECHO
II.29. The Funding Guidelines on Humanitarian Protection represent real progress in DG ECHO efforts to materialise its strategy on protection.	II.13. DG ECHO should consider the FGHP as a solid foundation to further explore its involvement in protection activities, and is encouraged to further streamline and operationalise them (cf. para 70).	DG ECHO
IV.11. The FGHP includes an illustrative annex on protection indicators. With further efforts of collection of good practice and systematisation, this list could be developed into a standard list of protection indicators.	IV.9. DG ECHO should develop a list of standard indicators, on the basis of Annex 2 of the FGHP, for the various activities or components of each type of protection project included in the list of those to be funded (Annex 1 of the FGHP). Where necessary, for instance for prevention projects, DG ECHO should examine how process indicators could usefully complement performance indicators. Partners, especially mandated agencies, should help further define indicators on protection (reference to ICRC partnership evaluation recommendations) (cf. para 71).	DG ECHO ICRC UNHCR and other relevant partners

² This table shows the main conclusions and recommendations of the evaluation structured on the basis of the strategic objectives (A-E). Roman numbers refer to the evaluation criteria each conclusion and recommendation is related to (II. Relevance, III. Alignment, connectedness and coordination, IV. Effectiveness, V. Efficiency and VI Impact).

IV.1. Global plans 2006 to 2010 do not include any principal or specific objectives dealing directly or indirectly with protection.	IV.1. Within the consultation process leading to the adoption of global plans, DG ECHO should include a standard section on protection in order to stimulate debate about better define protection objectives and related activities (cf. para 131-133).	DG ECHO
IV.3. DG ECHO shows a strong interest in protection in support documents, but they are not translated into objectives or activities.		
IV.12. DG ECHO staff in HQ and in the field wishes to increase their knowledge and technical expertise on protection issues and this will contribute to a better identification of protection needs, partners and projects in the field.	IV.10. DG ECHO should ensure a regular basic training course on protection issues for field and HQ staff (cf. para 159).	DG ECHO
IV.13. There is a need for the establishment of a more comprehensive centre of expertise in protection , including a protection specialist within the policy unit and a focal point on protection at the RSO level.	IV.11. DG ECHO is encouraged to establish a position of a protection sector expert at the RSO level and develop a centre of expertise in protection (cf. para 160).	DG ECHO
IV.14. Only a few partners have dedicated staff for protection aspects of assistance programmes, and there is some reluctance to fund such posts if they are not related to assistance results.	IV.12. DG ECHO should facilitate partners' hiring of staff with a protection background, both at field and at HQ level (cf. para 161).	DG ECHO, partners
IV.15. The review of protection operations in DRC has revealed the presence of numerous competent and reliable national NGOs in the field of protection.	IV.13. Where necessary, DG ECHO should consider indirectly contracting local NGOs to implement protection projects through direct partner funding (cf. para 162).	DG ECHO partners
V.1. Partners tend not to present their protection activities explicitly.	V.1. Resources for protection-related activities should be presented explicitly in the funding proposals and log-frames (cf. para 171).	Partners
VI.5. Limitations affecting the introduction of a gender dimension are similar to those affecting protection.	VI.5. DG ECHO should explore the feasibility of introducing expertise in gender at RSO level. DG ECHO is also encouraged to streamline gender and determine priorities in order to prevent an overburden of the process (cf. para 187-193).	DG ECHO
VI.6. Gender and protection dimensions require specific tools to be adopted, including their expression in administrative and monitoring documents.	VI.6. Develop specific tools to support the gender and protection dimension of interventions in GBV (in line with recommendation 18 of the Gender review), including guidance points in the Single Form (recommendation 19 of Gender Review) (Cf. para 188)	DG ECHO
B. Diversify the type and focus of protection projects and increase their reach		
II.4. DG ECHO involvement with other partners in protection against violence could be further increased.	II.2. DG ECHO is encouraged to further increase protection projects through partners other than the main protection mandated agencies when this can enhance the overall	DG ECHO, partners

	protection response (cf. para 53-58).	
II.6. In most DG ECHO programmes, psychological support is only provided to victims of SGBV, and this is a general gap in the international effort as a whole.	II.4. DG ECHO should increase the funding of mental health programs accessible to victims of very traumatizing events in addition to the support provided to SGBV victims (cf. para 82).	DG ECHO
II.22. There seems to be a need for increased support to emergency activities of mediation on land activities which are considered to be key in preventing violence among communities, especially in areas of intensive return such as in the Kivus.	II.10. DG ECHO is encouraged to either finance new projects aimed at supporting short term land mediation or early reconciliation processes or mechanisms, or to increase its funding to UNHCR for this purpose (cf. para 59,60).	DG ECHO
II.23. Presently, DG ECHO only supports the funding of such activities in DRC through UNHCR.		
II.24. Early reconciliation processes during the emergency phase could benefit from an increased involvement.		
II.25. DG ECHO's involvement in the funding of protection activities of prevention, such as training, dissemination, awareness or media campaigns, does not appear to be very significant.	II. 15. DG ECHO is encouraged to increase its support to effective activities of prevention (cf. para 61).	DG ECHO
II.27. Child protection projects, especially those dealing with reintegration of ex-Child soldiers (CAFGAs), appear to be underfunded, and their funding status needs to be clarified.	II.12.DG ECHO should verify the underfunded status of child protection projects and consider an increase of funding to such projects, particularly those that prevent the forced labour and recruitment and/or extraction of CAFGAs, and that facilitate their reintegration to civil life. For this purpose, partners should also supply information to DG ECHO. (cf. para 68)	DG ECHO, partners
II.28. There are currently few child protection projects funded by DG ECHO, except for the tracing and reunification activities carried out by ICRC. One of the main reasons is that DG ECHO has not recently received funding requests for child protection.		
C. Improve effectiveness and efficiency of protection projects		
IV.4. The weaknesses of the DRC health system limits access to services by victims of violations.	IV.2. Medical services and psycho-social care for SGBV victims need to be well established and easy to access at the primary care level. Additionally, these services need to be integrated in comprehensive sexual and reproductive health services accessible for all women (Cf. para 135, 139 and special section SGBV).	Donors, partners
IV.5. Vertical programmes and parallel service provision to victims, which have been put in place in some cases, are likely to divert resources and to incentivise opportunistic behaviour.	IV.3. The establishment of vertical and parallel systems to assist victims of SGBV should be avoided (Cf para 80 and special section SGBV).	Donors

IV.6. Reproductive health programmes are atomised and suffer from the poor quality of the health system. In some cases, victims ignore availability of services, while in other cases; quality has to improve to make them adequate.	IV.4. Establish quality standards for reproductive health services, assuring access to target groups (facilitate geographical access and assure free access), and market these types of services adequately, assuring awareness of their existence and adequacy of the offer to the demand (Cf par 135-138 and special section on SGBV).	Donors, DG ECHO; RSO, partners
IV.8. Most agencies use ad hoc protection rules within WASH interventions, and gender balance as a factor deciding on security issues is not always assured at the community level.	IV.6. WASH interventions should include standards related to protection and assure a gender balance in community participation (cf. para 86-87).	Partners
IV.9. Protection by presence is not sufficiently documented.	IV.7. Partners should be encouraged to monitor and report on the positive and negative effects (do no harm) of their presence on the protection of populations (cf. para 75-77).	Partners
IV.10. Effectiveness of road rehabilitation /reconstruction components or projects is not always optimal	IV.8. Enhance situation analysis, community involvement and contact with local actors to assure the pertinence and adequacy of road rehabilitation/reconstruction components. Involve technical capacities for public works in this field (cf. para 141, 172-173).	Partners
V.2. Partners have experienced some reticence from DG ECHO when including costs of specific staff and resources for protection activities if not linked to assistance projects.	V.2. Additional resources (human and technical) should be allowed for protection activities when results and indicators are formulated (cf. para 178).	DG ECHO, donors, partners
V.3. Current funding does not allow for the identification of resources allocated to protection activities other than the ones granted to mandate agencies.	V.3. Based on the standard list of protection activities, DG ECHO should define the costs involved for each type of activities. This would allow for a better efficiency monitoring (cf. para 166).	DG ECHO, partners
D. Mainstream the crosscutting issues of protection in assistance projects		
II.17. With the exception of projects implemented by the three protection mandated agencies, partner projects did not appear to deal specifically with the monitoring of violations and abuses against civilians, or at least was not expressed in the results framework of the projects.	II.8. When useful and/or necessary, DG ECHO is encouraged to fund express protection components included in assistance projects, particularly components of “soft monitoring”, if the concerned partners have developed an expertise in protection or are about to develop this expertise through training, hiring of specialized staff, or inside the cluster procedure. (cf. para 53-58).	DG ECHO, partners
II.18. A significant number of partners (outside of protection mandated agencies) are willing to include a “soft monitoring” component in future assistance projects.		
II.19. Many partners not specialised in protection would need preliminary or on-the-job training in protection.	II.9. DG ECHO should consider funding a specialised or protection mandated organisation to support partners that have integrated a protection component in their assistance projects when these partners lack experience in protection. When necessary, a protection	DG ECHO
II.20. INGOs specialised in protection are likely to be willing to		

take over the task of training other partners in protection, if requested to do so.	officer for one or several partners could also be financed (cf. para 55, 56).	
II.32. Partners consider “do no harm” to be a significant protection concern.	II.15. A standard “do no harm” section should be introduced in the single form to be completed by partners in which they must indicate the type of monitoring and reporting process that they will use to ensure compliance with their “do no harm” obligations (cf. para 75-77).	DG ECHO, partners
II.33. Very few partners include systematic “do no harm” precautionary measures such as pre- or post- action assessments in their projects that would precisely identify the risks and measures needed to avoid them.		
E. Support coordination of protection and increase connectedness		
II.15. DG ECHO’s intention to support the funding of the cluster co-lead was considered by all as a very welcome initiative.	II.7. DG ECHO is encouraged to confirm and extend its support to the functioning of the protection clusters in eastern DRC by funding the co-lead of the cluster. This funding should be consistent with the funding of the lead in order to maximise the output and build strong cooperation between the lead and co-lead (cf. para 50).	DG ECHO, donors, UN, partners
II.11. The protection cluster is confronted by multifaceted problems linked to its functioning. Globally, it is on progressing well but inputs need to be streamlined and outputs need to be maximised both qualitatively and quantitatively (advocacy interventions, joint documents, etc).		UNHCR, partners
III.2. Transition plans such as STAREC or I-SSSS include many significant components of protection.	III.1. DG ECHO should closely follow the implementation of STAREC and I-SSSS, in conjunction with other donors given the number and significance of protection components of these two transition plans (cf. para 101-104).	Donors, , UN
III.3. Many agencies such as UNHCR are significantly involved in the implementation of STAREC or I-SSSS.		
III.4. Other donors appear to be confronted by difficulties similar to those of DG ECHO, such as the exact content and boundaries of protection.	III.2. DG ECHO is encouraged to regularly compare its policies on protection with other major donors (cf. para 107).	DG ECHO, donors
III.5. In the coming years, DG ECHO and other EC/EU services are likely to increase their interactions on transition issues dealing with protection.	III.3. DG ECHO is encouraged to regularly review issues of transition with other EC/EU services, such as: <ul style="list-style-type: none"> • Emergency mediation on land issues • Early reconciliation processes • Monitoring of FARDC and PNC behaviour towards civilian population • Protection of arbitrarily arrested individuals • Reintegration of former combatants into civil life, in particular former CAFGAs (cf. para 112-118) 	DG ECHO, AidCo, DG DEV, EU Council

I. Introduction

I.1. Purpose and scope

23. The purpose of this evaluation is to assess the relevance of DG ECHO protection actions in the Democratic Republic of the Congo (DRC), as well as their effectiveness and impact. Recognising the importance of protection in humanitarian action, and specifically in the DRC context, the evaluation also aims to offer recommendations for the 2011 DG ECHO strategy on protection actions in the DRC. It further seeks to provide an understanding of past and current policies and programme approaches for undertaking protection and integrating protection into humanitarian interventions, including actions that aim to prevent and respond to the incidence of SGBV. Lastly, the evaluation aims to identify good practices. All findings, recommendations and lessons learnt are made on the basis of desk reviews, interviews with a range of actors, and field visits in DRC.
24. The importance of protection in humanitarian action has been increasingly established throughout the past decade. Protection was recognised in the Good Humanitarian Donorship (GHD) principles in 2003. Protection is also one of the initial nine, and later eleven, core areas of humanitarian action coordinated under the cluster approach since the Humanitarian Reform (2005). Protecting civilians from severe harm is regarded as an integral part of humanitarian action for preserving life and alleviating suffering. Its significance in the humanitarian sector with a greater engagement of a wide array of actors involving heightened coordination and an acknowledged need for protection mainstreaming, has modified the protection landscape.
25. The type of activities and approaches undertaken and categorised as ‘protection’ have evolved and broadened. In addition to the legal focus which has been traditionally followed and that has involved diplomatic pressure and advocacy, NGOs are increasingly involved in protection either through mainstreaming it into relief or focusing on the local level and community-based or self-protection.
26. As a follow-up to the recent adoption of its FGHP, DG ECHO intends to further examine its protection policy. Although the FGHP document reviews several definitions of protection and does not clearly recommend one of them, an agreement was reached that the notion of “protection against violence and abuse”, mentioned several times in the document, had to be adopted as a reference for the present evaluation, notably in view of its utility and operational character. According to this definition, *“DG ECHO supports financially non-structural activities aimed at reducing the risk for and mitigating the impact on individuals or groups of human-generated violence, coercion, deprivation and abuse in the context of humanitarian crises”*.
27. As protection is the object of considerable confusion, the evaluation team also deems useful, in order to facilitate the reading of this report, to shortly clarify a few issues.
28. Firstly, it is important to emphasise that protection against violence and abuse is simultaneously a specific sector and a cross-cutting issue. As a sector, protection against violence and abuse corresponds to precise activities such as monitoring and reporting of violations against civilians, advocacy with authorities in charge of protection, other prevention or assistance activities and support to victims of violations. As a cross-cutting issue, protection against violence, under certain aspects, such as “do no harm” or “protection by presence”, can be mainstreamed into various programmes, particularly those that deal with health or food security assistance. Both aspects of protection (sector and mainstreaming), which are applicable simultaneously, are considered in this report.

29. Secondly, it is recognised that objectives of protection against violence –and specifically preventive measures - are very hard to reach and to monitor. In cases of military attacks against civilians, saving lives can usually only be achieved through military protection. Humanitarian protection, as already discussed in the introduction, can only achieve results when a number of positive circumstances are fulfilled, such as access to the population in need of protection, will or power of authorities to agree to some degree of cooperation, etc. In addition, certain prevention activities, which are the most fundamental in this field, may sometimes appear to be questionable in the face of the difficulties of monitoring concrete results. In other terms, where assistance is most often “results” oriented, protection might be driven by different principles such as the duty or responsibility to “try” to protect. The difficulty in reaching results is not seen as an impediment to engagement. Protection for humanitarian actors is part of their responsibility and overall accountability. Indeed, there is a universal feeling of moral revolt within humanitarian staff when witnessing that the populations they helped to save through their assistance continue being subjected to acts of violence.
30. Thirdly, organisations involved in certain types of protection activities against violence should be aware of the security dimensions for the staff involved in these activities. Reporting on abuses and violence against civilians, even in a confidential way, might involve the risk of reprisal against the staff of the organisation involved in this reporting. The organisation should, therefore, have the means and capacity to implement a security policy for its staff, notably including a close monitoring of the risks through a multiplication of contacts with local organisations and authorities. At the same time, monitoring and reporting might involve the risk of reprisal for the victims suspected to be sources of information, and dealing with such risks also requires special expertise.

I.2. Methodology

Methodological approach

31. The overall methodological approach was formative and mostly relied on qualitative methods. Evaluation methods included document review, key informant interviews (both semi-structured and unstructured), focus groups with DG ECHO partners, observation and triangulation. An evaluation matrix based on the key evaluation questions guided the process. The evaluation team used interview guide for both DG ECHO partners and non-partners. The evaluation has consistently implemented a participatory approach, with partners and with beneficiaries. Evaluators give especial importance to meeting with beneficiaries of assistance programmes and, when adequate and possible, victims of violations were approached.
32. Three weeks were spent in DRC. The team was divided into two teams and visited the different geographic areas to cover – Kinshasa, North and South Kivu and Orientale Province (Ituri and Haut-Uélé).
33. During the field visits, beneficiaries of health and Water, Sanitation and Hygiene (WASH) interventions were met with, and the evaluation witnessed distributions and training sessions. Of particular interest were discussions with local organizations and associations, in some cases supported by DG ECHO partners or by the international community to provide counselling and support to victims, in order to understand the challenges involved in the protection component of the response. Contacts with community workers were achieved in South Kivu, North Kivu and Haut- Uélé, and with local legal advisors and legal support organisations in the field visits in South Kivu, region of Baraka, and in Dungu, Haut-Uélé. Interviews with health centre staff, local administrative authorities and users of health services and WASH facilities were also undertaken in all regions visited.

Limitations

34. The evaluation had to deal with a number of limitations: the limited existence of needs assessments and studies on protection issues, the lack of reliable data, the limited funding of protection actions and the great number of 2006-2010 partner project documents to analyse. The lack of adequate information seems to be a limiting factor both for evaluating and for responding to needs. Finally, the long distances in reaching the different geographical areas implied time limitations for the mission.

I.3. Overview of the general political, military and protection situation in DRC

35. The long-running conflict in DRC has been one of the deadliest in the last century. Despite an international agreement in 2003 to end what has been described as the “Africa World War”, and two further agreements at the beginning of 2008 to end fighting in North and South Kivu provinces, eastern DRC remains a region involved in armed conflict. More than five million people have died from the conflict and its effects (such as malnutrition and disease), some two million people are still internally displaced, and some 300,000 Congolese refugees remain in neighbouring countries. DRC is ranked 176 out of 182 on the Human Development Index (HDI).

36. Throughout 2009, tensions have remained high due to the presence of foreign and local armed groups hindering state control and preying on the civilian population. The heightening of violence in North Kivu and Ituri in late 2008 as a result of the resurgence of hostilities by the *Congrès national pour la défense du peuple* (CNDP) and the *Front de Resistances Patriotiques en Ituri* (FRPI) militias, together with interventions of groups such as the Lord Resistance Army (LRA), created massive unrest and reversed the fragile progress made in peace-building during recent years. Joint military operations, in some instances supported by the MONUC, have resulted in widespread violations against the civilian population, either directly from the attacks or as a consequence of retaliations measures. This caused massive population displacement, and the Kivus were crossed simultaneously by multiple groups of Internally Displaced Persons (IDPs) and returnees. MONUC was asked, notably by the humanitarian community, to stop supporting FARDC battalions responsible for these widespread human rights abuses. In 2010, the situation somewhat stabilised. According to the majority of opinions, although MONUC has been transformed into a stabilisation force, it is not likely to withdraw anytime soon from eastern DRC, as demonstrated by the very demanding benchmarks set as preconditions for its departure in the latest Security Council Resolution. Armed groups have remained (FDLR) or become (LRA) active again in 2009-10, and new groups are continuously established.

37. The situation has been declared stable in six sections of eastern DRC, where the STAREC and the I-SSSS are now applicable. New transition programmes are beginning to be implemented in these areas. However, in the rest of eastern DRC, widespread violations against the civilian population continue taking place with impunity and, in many cases, behind closed doors. Therefore, emergency needs and humanitarian responses are likely to continue in eastern DRC for quite some time. The return of refugees from Tanzania stopped as a result of renewed insecurity in the Kivus and the announced return of refugees from Rwanda had destabilising effects on some parts of North Kivu, where mistrust towards the returnees is widespread. As a result, in the field visit to eastern DRC, the evaluation team was confronted with a concomitant situation of stabilisation and emergency and could observe the resulting complexity for humanitarian actors to make strategic choices. Donors seem generally unsure about which attitude to adopt, which may be one of the factors which has led to the decreased funding of the HAP in comparison to last year at the same time.

38. Beyond the effects of joint operations, the civilian population will undoubtedly continue to be victim of severe and widespread violations for years to come or at least until FARDC and PNC can shift their role from being predators against their own population to a competent and effective protecting force. Unfortunately, present prospects for such a shift remain rather limited. While UNHCR monitoring of violations for South Kivu indicated a monthly average of 520 violations for the first six months of 2009, the same source shows an average of 739 violations for the first five months of 2010, i.e. an increase of 42 percent between 2009 and 2010. The top ranking violations against physical integrity and liberty for this single province are arbitrary arrests (394), injuries (351), kidnapping (235), rape (166) and murder (59).
39. Finally, DRC remains, for several reasons, a “global laboratory” as far as protection is concerned. Firstly, MONUC’s mandate has been gradually transformed to allow for a reinforced role of peacekeeping troops in the protection of civilians, and the force has been exploring new techniques of military protection such as temporary or mobile operating bases or joint protection teams. However, the blurred limit between peacemaking and protection raises the difficult issue of an increased collaboration between MONUC military and humanitarian actors on protection issues. Secondly, the establishment of protection clusters in the East, under the leadership of UNHCR, has for the first time, provided a common structure for humanitarian protection, where information and strategies can also be discussed with MONUC military and human rights players.

II. Relevance

II.1. Relevance of protection according to mandate

40. The first question to be examined in connection with relevance is linked to DG ECHO’s mandate. Indeed, DG ECHO staff refers quite frequently to the restriction imposed by the mandate on the institution’s capacity to be involved in protection activities, although the evaluation found a genuine interest among desks and TAs to better engage in protection given the recognised need in DRC.
41. The evaluation team reviewed two of the fundamental texts relating to DG ECHO’s mandate (the Council Regulation 1257/96 and the Consensus on Humanitarian Aid) but does not claim to have done exhaustive research for all available documentation on this subject. However, it has to be acknowledged that these texts focus mainly on assistance/relief. Moreover, it is assumed here that DG ECHO’s general practice has mainly been oriented over the years toward assistance activities, despite the constant support to protection mandated agencies.
42. According to Article 1 of the Council Regulation 1257/96 concerning humanitarian aid, “the Community’s humanitarian aid shall comprise assistance, *relief and protection operations*....” Article 2 of the same regulation specifies that “the principal objectives of the humanitarian aid operations (...) shall be a) to save and preserve life during emergencies and their immediate aftermath and natural disasters that have entailed major loss of life, physical, psychological or social suffering or material damage”. The same article also specifies under literature f) that the objectives shall also be “to *support civil operations to protect the victims of fighting* or comparable emergencies, in accordance with current international agreements”.
43. The Consensus on humanitarian aid follows approximately the same lines. It specifies that the objective of EU humanitarian aid is “to provide a needs-based emergency response aimed at preserving life, *preventing and alleviating human suffering* and maintaining human dignity (....)”.

Further down, the Consensus reiterates the content of the Regulation on the objectives of humanitarian aid: “humanitarian aid encompasses assistance, *relief and protection operations* to save and preserve life in humanitarian crises or their immediate aftermath”. In paragraph 16, the same document underlines the need for the EU to “*advocate strongly* and consistently for the respect of international law, *including International Humanitarian Law, Human Rights Law and Refugee Law*”. Finally, paragraph 17 recalls the EU’s commitment to the *responsibility to protect*, in accordance with the UN General Assembly Resolution 60/1 of October 2005.

II.2. Relevance of protection action compared to priority needs

44. Protection is widely recognised as the main humanitarian need in DRC. Faced with the extreme magnitude of the needs, the present overall protection response is clearly insufficient. In cases in which DG ECHO is to decide on further refining and expanding its protection policy, an increase and diversification of protection projects in DRC would be very opportune.
45. DG ECHO contributes substantially to protection efforts through their consistent and regular support to the main agencies undertaking protection in DRC (ICRC, UNHCR, UNICEF and OCHA).
46. The team was able to speak with representatives of these agencies in all areas visited, which allowed for a series of *prima facie* comments. Nevertheless, given the size of the country, the presence of differing teams in different regions, the assessment of these agencies’ performance is partial.
47. When examining the results framework attached to UNHCR project, only one of the eight results directly focuses on protection against violence³, which might appear to be unbalanced when compared to the seven others which deal with protection in a broader sense (assistance). However, UNHCR’s role in protection against violence has increased considerably in DRC as a consequence of the Agency’s function as protection cluster lead. UNHCR was able to compensate for the limitations of its movements in the field (due to UN security rules) through the development of an extensive network of national NGOs. Some of these partners, which were found to be quite effective and efficient by the team, are not only involved in the implementation of repatriation programmes but also contribute significantly to the overall monitoring of protection (thematic monitoring of violations). This monitoring of protection, which still needs to be further developed in additional provinces, is considered by many players to be the backbone of their information system in protection.
48. ICRC’s role in protection remains crucial. The main value of the Agency’s interventions, as far as protection against violence is concerned, appears to be the presence of the delegates in cut-off, isolated and sometimes quite risky areas, where they are able to be in contact with armed groups through their assistance programmes and develop a dialogue on issues of protection with them. The re-establishment of family links is also significant and carried out in coordination with UNICEF. It would appear that both DG ECHO and ICRC need to further explore and discuss ways to strengthen their cooperation on issues of protection, which could still be increased. Agreeing upon an increased reliance on process indicators when dealing with confidential data may be one area of examination. For instance, the number of oral or written interventions to armed groups might be considered non-confidential by the ICRC as long as the identity of the armed group, the type of violations discussed and, if necessary, the area concerned cannot be identified. At the same time, such an indication might provide DG ECHO with a sense of the magnitude of ICRC’s advocacy work. In addition, ICRC is urged to recognise its potentially important role in the definition of indicators and reporting. Both

³ Result 8: « the repatriated persons benefit from protection assistance ».

UNHCR and ICRC need to innovate and explore new tracing methods and further contribute to policy and mainstreaming in a context with limited capacity⁴.

49. UNICEF's lead role in the protection of children also appears to be well-established within DG ECHO. The programmes supported are the Rapid Response to Movements of Populations (RRMP), which is further examined in the present report and is mentioned by all partners as an excellent tool for protection, as well as a nutrition programme. However, DG ECHO is not funding any UNICEF programme on the protection of children and this issue should be further explored.
50. DG ECHO also supports OCHA in DRC in its overall coordination role. Such a role also extends to protection issues, such as the monitoring of IDPs and advocacy, and DG ECHO should also take these aspects of OCHA's mandate under consideration when examining its protection strategies.
51. From these preliminary indications, DG ECHO should continue its support to these organisations, expressly mandated to carry out protection. Enhanced know-how of DG ECHO in protection issues might even allow for increased cooperation and discussion with these agencies in the future.
52. The involvement in protection of DG ECHO's other partners than the main protection agencies was one of the evaluation's main focuses. The evaluation team reviewed all projects submitted to it by DG ECHO (41 projects) to identify components or activities aimed at reducing the risk or mitigating the impact of violence on individuals or groups. All partners were interviewed, some of them more than once, to get more precisions on the protection components or activities included in their projects. The table in Annex F provides the details of the findings, which are summarized in the following paragraphs.
53. **Five SGBV projects** deal with direct victims of violence. They are among the first projects to be mentioned by DG ECHO staff when raising the issue of protection. As SGBV issues are particularly relevant in DRC, and as DG ECHO places a special focus on them, there is a separate special section dedicated to SGBV.
54. Many projects focus on assistance, but include a component of **protection by presence** in cut-off/isolated areas (23 projects on 41, i.e. 56 percent). Interviews with partners and non-partners unambiguously confirm that the simple presence and activities of expatriates can provide a form of protection in areas where the civilian population is locked up with armed groups without regular external access. The simple fact of bringing assistance or interacting with armed groups is of a nature to decrease tensions. However, partners should also be careful not to trigger, by their presence, a misleading perception of protection among populations, as it has occurred in some cases brought to the attention of the evaluation team. Thus, DG ECHO's policy of encouraging partners to develop projects in cut-off/isolated areas is significant not only because it allows them to reach populations generally in dire needs of assistance, but also because these assistance projects include this implicit protection component. Yet, for logistical and security reasons, these projects tend to be much more costly than others, confirming the high cost of protection.
55. A series of projects, closely connected to the ones just mentioned, include the establishment or rehabilitation of a **landing site** in order to allow for the landing of ECHO flights (or other planes), or the **construction or rehabilitation of dirt roads** to facilitate humanitarian access. Rehabilitated dirt roads, if successful, entail a very significant protection effect, as they facilitate the escape of populations that are victim of attacks, allowing them to access basic social services in neighbouring

⁴ See DG ECHO evaluations of the partnership with ICRC (2006) and UNHCR (2005), as well as the *Cluster Approach Evaluation, 2nd phase, Country Study DRC*; 2010; Groupe URD and GPPI; commissioned by IASC.

areas, as well as humanitarian access to these cut-off/isolated areas for both humanitarian staff and goods. However, an in-depth examination of potential negative side-effects of the project (“do no harm”) should also be systematically carried out, as roads could also be used by militias for attacks. It should also be pointed out that, although DG ECHO also examines such projects under this significant protection component, such an aspect is generally not formalised in the results framework because partners cannot find Specific, Measurable, Achievable, Relevant and Time-bound (SMART) indicators and fear shortage of sources of information to monitor results.

56. The final type of protection projects included in DG ECHO’s eastern DRC portfolio relates to the **support of protection coordination activities**. DG ECHO recently decided to finance a series of cluster co-leads (in the health, nutrition and protection clusters) and a project is presently being undertaken for the funding of a partner as co-lead of the protection cluster in DRC (Oxfam). The evaluation team paid special attention to the actual functioning and performance of the protection clusters in eastern DRC and Kinshasa. Details about these findings can be found in a specific annex (Annex G). In summary, the protection cluster still needs further improvement in terms of effectiveness. Despite the difficulty of its coordination task, the cluster was able to perform its most fundamental duties of streamlining the monitoring of violations, reviewing gaps and duplications within the sector and carrying out joint advocacy on behalf of all cluster members. DG ECHO’s intention to support the co-lead of the cluster was welcomed by all interviewees, although UNHCR drew attention to the need to closely coordinate this support with the funding of the cluster lead in order to strengthen the overall effectiveness of the cluster. DG ECHO should, therefore, remain in close contact with UNHCR donors on this aspect. Moreover, the partnership between the lead and the co-lead of the cluster could be further enhanced through the development of a joint results framework to monitor the effectiveness and impact of the cluster’s work.
57. To summarize, this review demonstrates that DG ECHO involvement in activities against violence with partners other than the main protection agencies, could be further increased. It appears that, although protection is frequently discussed with partners when designing projects, protection components are not frequently included in projects.
58. When reviewing the **gaps** in DG ECHO’s protection response, it appeared that the project portfolio could be improved in a number of areas.
59. With the exception of projects implemented by the three protection-mandated agencies, partner projects did not appear to be dealing specifically with the monitoring of violations and abuse against civilians, or at least was not formally expressed in the results framework of the projects. However, interviews with partners and non-partners showed that many of them are already collecting information on violations in an informal way. Some of them monitor violations as part of the Multi-Sector Assessment (MSA) which is carried out in the assessment phase of the UNICEF RRMP programme, also funded by DG ECHO. This form of monitoring consists of the collection of general information on recent incidents and patterns of violence (an estimation of the number and type of violations linked to violence in the concerned area). One of the assessment’s objectives is to review the potential negative side-effects of assistance distributions in order to reduce the risk of doing harm. This monitoring differs significantly from the in-depth documentation of cases performed by human rights actors, which involves private interviews with victims. Collecting information on patterns of violations and abuse does not involve individual interviews with victims of a nature that would put them at risk, but is limited to non-inquisitive collection of information with groups of individuals or community leaders. This form of monitoring is sometimes described as “*soft monitoring*”.
60. Interviews with partners and non-partners helped to identify constraints and opportunities linked to this form of monitoring. Partners in cut-off/isolated areas emphasized that they were uniquely

positioned to bring back basic information on violations in areas where very few actors were present and where violence against civilians could often be significantly higher than in other regions. Most of them mentioned that the protection cluster seemed to be the natural recipient for such sensitive information, either in a formal way through oral communication during the cluster meeting or in more confidential way, through bilateral communication with the cluster lead (UNHCR) or other organisation specialised in protection. All interviewees were of the opinion that the cluster had the very useful function of “recycling” or “neutralisation” of the information, in the sense that the consequent advocacy interventions made by the cluster lead on behalf of the cluster members did not disclose sources and, therefore, in no way compromised the work of the partner in the area concerned by endangering the security of its staff.

61. Some partners were aided in their protection function by a full time protection officer. Others were also willing to be assisted in such a way, but lacked the financial means to do so.
62. Certain interviewees felt that their staff needed specific training in protection issues in order to carry out regular monitoring of violations. Suggestions were made that an organisation specialised in protection, if mandated to do so, could organise regular staff training for a group of partners involved in protection (for instance, in the same geographic area) and, at the same time, support them in their protection activities by providing a punctual “on the job” expertise in the field. NRC and Oxfam confirmed that they might consider being involved in a project consisting in the training and the support of partners in protection. Partners could also develop an expertise in protection inside the cluster procedure.
63. Most organisations did not feel comfortable enough to play the role of direct advocate with armed groups (or local civilian authorities when present), pointing out that such a role required the creation of a trust relationship with these armed groups and/or the local populations, which could only result from a constant and extended presence in the concerned area.
64. DG ECHO should explore possibilities for formalising activities of monitoring and reporting on violations carried out by partners into an express component of “soft monitoring” integrated into assistance projects. However, in exploring such possibilities, DG ECHO should try to adhere to the following principles:
 - The starting point for these types of activities should be continuing to support agencies that have a proven capacity/competence/experience in protection, as it is recommended in the FGHP. Using other partners to carry out “soft monitoring” should only be recommended if the protection experienced partners do not have the capacity to respond to the need, notably in cases where they are not covering the specific geographical area (for instance in cut-off/isolated area).
 - Monitoring and reporting on violations remains a sensitive exercise that should not be encouraged across the board, but rather only with organisations which have the capacity (or have acquired it) to do it professionally and in a manner that is safe for themselves and for the endangered populations.
 - To start with, the introduction of a formal component of “soft monitoring” into projects is suggested in the cases where the partners are already performing such activities in a non-formal way, such as within the framework of a health or food security project.
 - As much as possible, the partner should be helped in getting the basic know-how in protection through the support and/or training of a player specialised in protection. In projects, DG ECHO could seize the protection cluster co-lead funding as an opportunity to include a training or support component for other partners willing to increase their involvement in protection monitoring.

65. The evaluation team was asked to examine whether or not issues related to land had been incorporated in the implementation of protection actions, particularly by partners. The fundamental underlying tensions linked to land issues in DRC need to be addressed through land reform and a merging of the two parallel legal systems governing access to land: formal and customary. Dealing with land reform and land tenure appears to be far outside of DG ECHO's mandate. However, the current transitional situation requires emergency programmes of **land-related mediation** which could fall within DG ECHO's sphere of interventions. DG ECHO deals with certain aspects of such issues in food security projects for IDPs and returnees. In addition, land-related mediation activities are carried out on a small scale by some UNHCR partners within the framework of repatriation programs. However, there will be a need to significantly increase this type of project in 2011, notably in relation to the return of refugees and IDPs in the Kivus. UNHABITAT, in its implementation of a UNHCR program, carries out what they consider to be "emergency land mediation" activities in areas of return. According to UNHCR, a quick mediation process on land issues is urgently needed to diffuse interpersonal or inter-ethnic tensions in these territories. Some partners claim to have already resolved a substantial number of land conflicts in such an emergency fashion, despite difficulties in logistics (need for security escorts by MONUC). DG ECHO should consider increasing its support to these activities which are presently severely underfunded (see Annex H) and will be crucial in the short term to diffuse tensions in the Kivus and Ituri.
66. Beyond its general funding support for UNHCR, DG ECHO does not provide funding for the **reconciliation processes** in eastern DRC. Early reconciliation processes can be supported during the emergency phase, for a limited duration, in order to tackle the most urgent issues that could potentially destabilise areas of return of IDPs and refugees. Land is certainly one of the main issues, but inter-personal or inter-community hatred and revenge is likely to quickly reappear as a fundamental problem when returns intensify in North Kivu and South Kivu. However, it is important to note that a reconciliation process is not presently mentioned in the list of examples to be funded in the FGHP (Annex E).
67. Protection is closely connected to the **prevention of violations**, and prevention is also carried out by training, dissemination, awareness and/or media campaigns. Players specialised in protection carry out many of these activities (dissemination of IHL to armed forces or groups by ICRC, of Guiding Principles on IDPs by OCHA or on refugee law by UNHCR for instance). The organisation, Search for Common Ground, is involved in establishing and supporting "civilian protection committees" within FARDC Units, working with those committees to sensitise troops and monitor abuse. Prevention activities also involve **early warning**. INGOs are increasingly keen on becoming involved in activities consisting in the provision of information to populations about risks encountered or in helping populations in the formalisation of risks and response in the framework of **protection plans (self-protection capacities)**. Oxfam is also involved, with the funding of EC, in the reinforcement of dialogue between authorities and populations on protection. The regular updating of protection mapping, under the co-leadership of MONUC and protection clusters, also allows for the quick preparation of a protection response to upcoming attacks.
68. It must be recognised that the impact of projects focusing on prevention is sometimes difficult to evaluate. However, it would appear that in DRC, DG ECHO is only narrowly involved in such programmes outside of the general support provided to protection-mandated agencies. If DG ECHO decided to increase its protection activities, generally speaking, support for such activities would also have to be enhanced.
69. To summary, the evaluation has shown that DG ECHO has several possibilities for increasing its protection activities. It can do so by increasing the number of protection components to be integrated into assistance projects (mainstreaming) or by diversifying the type of protection projects.

II.3. Relevance of protection action according to beneficiaries

70. Protection needs according to beneficiaries can be analysed through various criteria, such as the type of pattern of violence prevailing in certain geographic areas or the type of violations perpetrated against civilians. The evaluation team used both types of criteria in its analysis of the protection dimension of projects included in DG ECHO's portfolio.
71. When looking at the various geographical patterns of violence in Eastern DRC, the most vulnerable people in terms of protection are those **living in areas controlled by armed groups (including FARDC)** or armed elements who act as predators to this entirely unprotected population. Unfortunately, these areas are also generally the most difficult to access due to security and, at times, logistical reasons. As a result, protection efforts tend to be focused on more accessible areas. In this regard, DG ECHO's policy to **initiate/develop projects in cut-off or isolated areas** should be considered as courageous and focused on the most vulnerable individuals, although the primary objective of such projects is primarily to bring assistance. As mentioned above, the protection effect linked to the mere presence and activities of humanitarian staff in these areas can be quite significant.
72. If one turns to the type of violations and to the people most in need of protection, they are those who are threatened or victims of **violations against physical integrity and liberty**. According to UNHCR monitoring of these violations in South Kivu⁵, the top ranking violations in this category are arbitrary arrests, injuries/mistreatment, kidnapping, rape and murder. DG ECHO appears to respond substantially to **victims of rape** and sexual violence and, through its medical programs, to those who have been **injured**. A focus group of partners in Ituri revealed that most partners considered **arbitrary arrest and detention** as the first protection priority in the area. This was also confirmed in South Kivu through the statistics just mentioned above. It can, in fact, be argued that arbitrary arrest and detention have become so widespread in DRC that it increasingly seems to be a phenomenon of massive kidnapping and slavery. Unfortunately, this appears to be outside of the DG ECHO mandate and practice, or perhaps involvement is limited by partner capacity, if one accepts the general support provided to the ICRC.
73. A second series of victims of violence are those that are victims of **looting, stealing, property damage, arbitrary confiscation, extortion, arson and illegal taxation**. Although DG ECHO does not fund specific compensation programmes, victims of such violations are likely to be included among groups of IDPs or returnees who are benefitting from assistance programs funded by DG ECHO. If properly designed, these programmes would either target these people individually or include various assistance packages catered to their needs.
74. **Children in DRC** are confronted with well-known violations and abuses. Children are often forced into recruitment, are kidnapped, experience sexual violence and/or forced labour; and, similar to many other places, are among the most vulnerable to violence. UNICEF estimates that about 44,000 children would be used as child labour force (or held as labour slaves) by armed groups exploiting the numerous artisanal mines in remote areas such as Shabunda or Walikale. Although child protection is underfunded, DG ECHO has not recently received funding requests for this purpose and its portfolio **has not included any child protection projects**. Save the Children UK, the main player in the East in the field of reintegration of former CAFGAs, was forced to close some offices and key programmes due to a US\$3 million shortage of funding. ICRC in Bukavu has also called for a substantial increase of funding in this field. The actual funding status for child protection, especially those dealing with reintegration of ex child soldiers, needs to be clarified even though a recent report commissioned by UNICEF gives more importance to other aspects of child protection such as the forced labour.

⁵ List of protection incidents occurred from January to May 2010 in South-Kivu, established by UNHCR South Kivu Office.

II.4. Relevance of strategies and tools

75. The evaluation team has been examining the relevance of DG ECHO's present procedures to address protection issues as well as the type of strategic document or guidelines available in this field.
76. The recently adopted **FGHP** appeared to be the most significant tool at DG ECHO's disposal in developing and monitoring its protection activities. However, the FGHP should be further refined and streamlined in order to achieve the transformation from an information document on protection to a policy document. The FGHP should be discussed at regional workshops and country, and regional plans to operationalise them should be adopted (this process is presently ongoing in DRC). Protection RSOs (see below) could produce tip documents relating to various aspects of protection within the specific geographical contexts. Finally, the evaluation also found that there was a need for an active support of these guidelines, and of protection issues in general, by DG ECHO central management.
77. Another valuable characteristic of the FGHP is the list of examples of protection activities to be funded by DG ECHO. If this list is slightly reorganised and systematised, it could serve as a **"standard" list of protection activities to be funded by DG ECHO**, which could then be transmitted as a separate tool for DG ECHO staff to review on a regular basis to reflect on evolving trends.
78. The issue of the **definition of protection** should be further examined. Although it is a very complicated topic, the coexistence of various definitions within the same organisation makes it impossible to produce positive results unless a very precise and different scope for each definition is defined to avoid constant confusion. For instance, humanitarian and human rights definitions of protection differ quite significantly. Not surprisingly, the understanding of protection and views on the definition of protection vary considerably between partners specialised in protection and those who consider themselves more as assistance-driven. Among the former, a narrow definition of protection is predominant (protection against physical and psychological effects of violence). Among the latter, there is some sense of confusion over what protection actually is and a tendency to consider that all sectors of assistance can be viewed as having direct or indirect links to protection. ECHO will have to respect each partner's approach, and at the very least, agree to have a performance framework with formulated objectives and results.
79. Progress on protection will be insufficient unless more coherence is brought to this fundamental issue. Obviously, this remark is primarily true for the entire humanitarian community. Yet, for unknown reasons, no significant progress seems to have been made in this regard for several years by the main protection agencies. In fact, donors are faced with having to deal with partners who opt for different definitions of protection, which makes matters much more complicated. One might wonder whether or not donors should be entitled to take the lead in this regard and should call for new meetings in order to break the present deadlock and continued confusion.
80. If protection is to be further developed within DG ECHO, this is likely to result in the adoption of **new types of indicators** and the **adaptation of documents such as the Single Form or the Fiche Op**. As mentioned hereafter under "effectiveness", indicators in protection cannot be as SMART as those for assistance and tend to be more process, rather than impact, -oriented. Presently, the reporting burden and the need to respect SMART indicators may also act as a disincentive for including protection components in project proposals.

81. Some progress should also be made in the implementation of the “do no harm” tool. “Do no harm” remains a constant concern for humanitarian players in eastern DRC. The evaluation team heard about numerous incidents with negative side-effects for the population benefitting from humanitarian action, particularly within the framework of distributions of assistance. Many examples were related to civilians falling prey to armed groups shortly after distributions.
82. In another case, an agency’s distribution of seeds to families of soldiers backfired as the military subsequently blocked further distribution to civilians which did not include their families among the beneficiaries. Coincidentally, the same agency considers that the distribution of seeds to the military wives was in fact useful in integrating them into the communities. However, the evaluation found that there was an insufficient use of the “do no harm” approach and when referred to, the concept was misunderstood in some areas.
83. In Dungu for instance, the cluster conditions the provision of assistance instead of finding ways in which the assistance can still be provided. This is a misuse of the approach. Most partners mentioned “do no harm” either as a first protection priority or as a constant concern linked to all humanitarian action. However, very few partners were able to demonstrate the systematic establishment of precautionary measures such as pre- or post- action assessments, to identify the risks and the measures to avoid them. Therefore, it is advisable to include a standard “do no harm” section in the Single Form in which partners are requested to indicate the type of monitoring and reporting process they are willing to put into place to ensure compliance with their “do no harm” obligations. The fiche op should include further details about the content of this “do no harm” monitoring and reporting process, such listing potential negative protection side-effects of the project and the protection measures foreseen or implemented to avoid them (for instance pre- and post- assistance assessment reports).

II.5. Relevance of protection mainstreaming in various sectors

84. DG ECHO articulates its response to needs through an integrated multi-sector approach that includes health, WASH, food security and nutrition as main sectors, and logistics. As already mentioned, protection against violence and abuse is a sector per se, but some aspects of protection can be mainstreamed in the sector response. Assistance to specific victims of violence and “do no harm” principles can relate to all sectors. Additionally, the response in all sectors can have a positive influence on protection issues. Moreover, as already examined above, a specific component of protection can be added to programmes in all sectors, particularly to food and non-food assistance and to health and nutrition. Finally, it should be emphasised that definitions of protection broader than the one chosen for this evaluation would include all sectors as fully part of protection.

Health

85. The entire health sector is interlinked with protection in DRC. The assurance of access for victims of violence to health care falls within DG ECHO’s mandate and constitutes the core of its interventions in this sector. DG ECHO covers practically all victims of violence through the health sector intervention, assuring the provision of medical care at the very least. Beneficiaries primarily include SGBV victims, but rapid reaction and availability of services are also assured for other victims of conflict, such as war wounded and IDPs.
86. DG ECHO’s approach is to support local structures and facilitate victims’ free access to services. This is done by reinforcing local capacities and integrating medical care to victims into the general health system, which allows for a more coherent approach and prevents stigmatisation and opportunistic behaviours. The raising of public interest in SGBV has, however, facilitated the

creation of some vertical programs with the establishment of specific referral centres. As a rule, vertical programs should be avoided as they are unsustainable, not cost effective and create distortions. They can also raise some ethical concerns by creating services for particular groups of victims rather than assuring access to the general population. In DRC, some opportunistic behaviour has already been reported. At the beneficiary level, some clients are reported to have pretended to be victims of SGBV in order to access services and, at the agency level, some poorly strategised and operationalised funding proposals have found their way to actually being considered by donors.

87. DG ECHO has systematically and gradually expanded the geographical coverage of the sector. This evolution is clearly evidenced for the period 2006-2010. Since the beginning of this year, DG ECHO has expanded its presence to many areas where instability and SGBV are prominent and necessitate humanitarian presence. However, a shortage of partner capacity and a lack of reliable data jeopardises an adequate gap analysis and may affect further increase in this geographic coverage.
88. Mental health is the most significant gap identified in the sector. The extreme brutality used in some violent incidents can cause widespread psychological trauma. Yet, in most DG ECHO programmes, psychological support is only provided to victims of SGBV, and this is a general gap in the international effort as a whole. Only one DG ECHO partner has developed a programme to address mental health needs at community level (in South Kivu) following a specific incidence of violence supporting the referral centre and a de-institutionalised approach. This could be enhanced and implemented more systematically if partner capacity allows.
89. Most programmes in this sector present shortcomings in their description of activities carried out (related to protection). The evaluation team identified some gaps in the way protection components are addressed in health sector funded operations, namely procedures for forensic examinations, reporting of violations procedures, stigmatised attitudes, little advocacy and a limited scope of interventions; sometimes neglecting victims such as men, children or witnesses of a violation. As mentioned in the SGBV special section, protection components of health programmes would benefit from the introduction of some basic standards and indicators for this sub-sector (such as the Minimum Agency Standards to incorporate protection into humanitarian response). This would improve the identification and description of protection activities in health and facilitate costing and monitoring.
90. As in all sectors, health is confronted with transition issues. After many years of presence, DG ECHO is struggling with the hand-over of the sector support to development actors. In addition, the establishment of fees and the low quality of the local system negatively affect accessibility for victims in areas that are stabilising progressively.

Water, Sanitation and Hygiene (WASH)

91. In a context where access to safe water and availability of sanitation suffers from grave structural deficit, the task of granting those services to victims of violence is challenging. DG ECHO has addressed these problems from different perspectives: emergency (with specific tools and strategies), return and reinstallation (with more long term solutions including hygiene promotion), and education. In this regard, the evaluation team found some inconsistencies among emergency and reinstallation tools coincidental in time and location. In one case, IDPs were provided with emergency latrines while next door returnees benefitted from permanent ones.
92. As for the protection aspects of WASH activities, some agencies seem more conscious of this dimension than others. On the one hand, the benefit of limiting the risk involved in travelling long distances to fetch water or to reach sanitation facilities is obvious and is systematically taken into consideration by some agencies. Wells and latrines are also placed according to security criteria.

However, activities, indicators and resources for protection should be more systematically integrated in project documents in order to facilitate the monitoring of protection and to eventually allow for a formulation of protection results. As in health, a reflection based on available standards and the involvement of the RSOs expertise is advisable.

93. Finally, the adequacy gender-balanced participation should be assured when defining WASH activities. Women and children are commonly involved in fetching water, and the vulnerability of women when accessing sanitary facilities is well documented. In some cases, however, women are not part of the community committee in charge of defining the location of the WASH facilities, and agencies are not vocal enough to change this situation.

Food security and Non- food assistance

94. Eastern DRC remains a very predatory environment where armed groups frequently govern populations and regulate the war economy. Impartial distribution of assistance in such an environment remains extremely challenging. Realities on the ground generally force populations to negotiate a certain quota of assistance received or be confronted with a high risk of attack and/or other predatory violations or reprisals.
95. In such an environment, food and non-food assistance players have been confronted with many difficulties.
96. Only very small portions of food are distributed to allow beneficiaries to better carry and hide such assistance and escape from predatory behaviours by armed forces or groups (stealing, extortion, harassment). This compels agencies such as WFP to multiply assistance distributions, which in turn, causes complications and increases costs.
97. The choice of distribution point locations is extremely important, especially during periods of intense fighting. Distribution points should simultaneously be distant from the fighting, yet not very far from the population's overnight location. The "do no harm" principle might sometimes lead agencies to abandon assistance when the risk of predatory behaviours is too high, although examples in eastern DRC have shown that this has not been the case. In this regard, the RRMP process of pre-distribution assessment was unanimously hailed as being an extremely useful tool (see above under "do no harm").
98. The issue of distribution to families of military members, who usually accompany them in the field, still has no solution, as neither MONUC military nor humanitarian players consider such distribution as part of their responsibilities. Distribution of seeds by FAO to these families was considered a very good idea by some and as a counterproductive measure by others, as military elements apparently decided to impose their participation in distributions as a condition to any further distribution in the area concerned.
99. Following joint operations against armed groups during 2009, the speed of displacement and subsequent return of populations have made assessments and distributions extremely complex, as it became difficult to differentiate between temporary and longer term needs.
100. Some partners noted the importance of distributions in order to identify the presence of CAFGAs, unaccompanied children or other vulnerable groups in the area.
101. Also creating many difficulties is the question of the impartiality of distributions in areas where rival ethnic groups are living. Some partners' food security projects have, therefore, introduced

components of agricultural assistance which include specific strategies to decrease tensions between host communities and IDPs or returnees. However, these mediation or conflict resolution components could be better articulated, and partners should be asked to provide more performing results monitoring systems (see above under “reconciliation”).

102. Finally, the choice and design of the non-food item (NFI) assistance proved to be critical in ensuring respect of the “do no harm” principle. For instance, distribution of cooking fuel to populations in villages by some partners prevented women from having to cover long distances to fetch wood and be exposed to the risk of sexual violence. Conversely, the choice made by DG ECHO to distribute machetes to agricultural groups was contested by some agencies on the ground that the tools could too easily be used as weapons.

II.6. Main conclusions / Strategic and operational recommendations

II. Relevance	
Main conclusions	Strategic and operational recommendations
Mandate	
1. Both the Council Regulation 1257/96 and the Consensus document provide a short and yet clear mandate for DG ECHO to be involved in protection activities.	
Protection needs and DG ECHO policy	
2. Protection is widely recognised as the main humanitarian need in DRC. Faced with the extreme magnitude of the needs, the present overall protection response is clearly insufficient.	1. DG ECHO is encouraged to further develop and streamline a coherent protection policy for DRC.
Number of projects dealing with protection against violence	
3. DG ECHO contributes significantly to protection efforts through consistent and regular support to the main agencies undertaking protection in DRC.	
4. Globally speaking, involvement of DG ECHO in protection against violence activities with other partners could be further increased.	2. DG ECHO is encouraged to further increase protection projects through partners other than the main protection mandated agencies when this can enhance the overall protection response.
SGBV	
5. ECHO is including a response to SGBV survivors needs in all health sector programmes and provides support to the referral centres in North and South Kivu.	3. ECHO is encouraged to strive on the current integrated approach and to support the reinforcement and access to services avoiding vertical programs
Mental health	
6. In most DG ECHO programmes, psychological support is only provided to victims of SGBV, and this is a general gap in the international effort as a whole.	4. DG ECHO should increase the funding of mental health programmes accessible to victims of very traumatising events in addition to support to SGBV victims.
Access and protection by presence	
7. 56 % of DG ECHO funded projects include an aspect of protection by	5. DG ECHO should further encourage the development of projects in isolated/cut-off areas in order to foster protection by

presence.	presence.
8. Presence of expatriates in cut-off/isolated areas is unanimously considered to decrease tensions in the area	
9. The opening of landing sites or roads can play a significant role in the protection of populations in cut-off/isolated areas.	6. DG ECHO is encouraged to further consider ECHO Flights and road or landing site constructions/rehabilitations in cut-off/isolated areas as major vectors to increase protection of populations. DG ECHO should, therefore, further encourage funding of projects in this sub-sector.
10. DG ECHO flights represent a crucial lifeline for humanitarian actors to have access to cut-off/isolated areas.	
Protection cluster	
11. The protection cluster is confronted with multifaceted problems linked to its functioning. Globally, it is progressing well but needs to streamline the inputs and maximise the outputs, both qualitatively and quantitatively (advocacy interventions, joint documents, etc).	7. DG ECHO is encouraged to confirm and extend its support to the functioning of the protection clusters in eastern DRC by funding the co-lead of the cluster. This funding should be consistent with the funding of the lead in order to maximise the output and build strong cooperation between the lead and the co-lead.
12. The structure of the cluster should be reviewed to introduce two types of meetings: 1) global coordination meetings with all participants; 2) advocacy task force meetings with limited participation.	
13. The responsibility of the cluster to decide on attribution of funds for protection projects is considerably slowing and complicating its task.	
14. Despite all these difficulties, the protection cluster was able to perform the major part of its most fundamental duties, being streamlining information on protection and monitoring violations and joint advocacy on behalf of all cluster members.	
15. DG ECHO's intention to support the funding of the cluster co-lead was unanimously considered to be a very welcome initiative.	
16. A review of the activities of the cluster demonstrated that the funding of the cluster co-lead and the lead should be coordinated in order to strengthen the overall effectiveness of the cluster.	
Monitoring of violations and "soft monitoring"	
17. With the exception of projects implemented by the three protection mandated agencies, partner projects did not appear to deal specifically with violation monitoring or abuse against civilians, or at least not expressed formally in the results framework of the	8. When useful or necessary, DG ECHO is encouraged to fund express protection components included in assistance projects, particularly in components of "soft monitoring", if the concerned partners have developed (or about to develop) an expertise in protection through training, hiring of specialized staff, or inside the cluster procedure.

projects.	
18. A significant number of partners are willing to include a “soft monitoring” component in future assistance projects.	
19. Many partners not specialised in protection would need preliminary or on-the-job training in protection.	9. DG ECHO should consider funding a specialised or protection mandated organisation to support partners that have integrated a protection component in their assistance projects when these partners lack experience in protection. When necessary, a protection officer for one or several partners could also be financed.
20. INGOs specialised in protection are likely to be willing to take over the task of training other partners in protection, if requested to do so.	
21. Some partners are already supported by specialised protection officers, while others would like to have this support but lack the financial resources.	
Emergency Mediation on land and early reconciliation	
22. There seems to be a need for increased support to emergency activities of mediation on land activities which are considered a key factor in preventing violence among communities, especially in areas of intensive return such as the Kivus.	10. DG ECHO is encouraged to either finance new projects aimed at supporting short term land mediation or early reconciliation processes or mechanisms, or to increase its funding to UNHCR for this purpose.
23. Presently, DG ECHO only supports the funding of such activities in DRC through UNHCR.	
24. Early reconciliation process during the emergency phase could benefit from an increased involvement.	
Activities of prevention	
25. DG ECHO’s involvement in the funding of protection activities of prevention, such as training, dissemination, awareness or media campaigns does not appear to be significant.	11. DG ECHO is encouraged to explore further and more consistent support to protection activities of prevention.
Arbitrary detention	
26. Arbitrary detention (including private detention) in eastern DRC appears to be the number one protection issue in terms of numbers of incidents and the very few players involved in activities aimed at releasing or improving the conditions of these victims.	
Child protection	
27. Child protection projects, especially those dealing with reintegration of ex-CAFGAs, appear to be underfunded and their funding status needs to be clarified.	12. DG ECHO should verify the underfunded status of child protection projects and consider an increase of funding to such projects, particularly to prevent the forced labour and recruitment and/or extraction of CAFGAs and facilitate their reintegration to civil life.
28. There are currently few child protection projects funded by DG ECHO, except for the tracing and reunification activities carried out by	

ICRC. One of the main reasons is that DG ECHO has not recently received funding requests for child protection.	
Funding Guidelines on Humanitarian Protection (FGHD)	
29. FGHP represents real progress in DG ECHO efforts to materialise its strategy on protection.	13. DG ECHO should consider the FGHP to be a solid foundation to further explore its involvement in protection activities and is encouraged to further refine and streamline them.
30. However, these guidelines still appear to be in need of further refining, streamlining and operationalisation.	
31. They notably provide an exhaustive list of DG ECHO’s funding around the world, although this list needs to be reorganised.	14. DG ECHO should reorganise and streamline the standard list of protection projects to be funded (Annex 1 to the FGHP), in order to use this list as a separate and operational tool to be further disseminated.
“Do no harm”	
32. Partners consider “do no harm” to be a significant protection concern.	15. A standard “do no harm” section should be introduced in the Single Form to be completed by partners in which they must indicate the type of monitoring and reporting process that they will put into place to ensure compliance with their “do no harm” obligations.
33. Very few partners include in their projects systematic “do no harm” precautionary measures such as pre- or post- action assessments to precisely identify the risks and measures to avoid them.	

III. Alignment, connectedness and coordination

III.1. Alignment with national humanitarian and protection plans

103. DG ECHO’s actions, strategy and sectoral approaches are included in the HAP.
104. MONUC and UNHCR also drafted a **UN System-Wide Strategy for the Protection of Civilians** in DRC in 2009. The document includes a common strategy for MONUC military, MONUC police, and humanitarian and human rights agencies, and recommends a strong cooperation between these groups. This raises the issue of cooperation between humanitarian players, which should respect the principle of neutrality, and a peace-keeping force which is considered by some to be a party to the conflict as a result of its support to FARDC military in joint operations.
105. Alignment or non-alignment on the UN strategy for the protection of civilians is not crucial for many reasons. However, DG ECHO should reflect on its position in regard to the issue of cooperation on the protection of civilians between humanitarian players and a peace-enforcement force, given the fundamental role played by MONUC in DRC. Interestingly, this form of cooperation is rejected by some partners, such as ICRC, based on respect of the principle of neutrality, whereas it is supported by UNHCR, due to its key role on coordination. Moreover, FARDC, which is indirectly and sometimes directly supported by MONUC in its military effort against armed groups, is among the worst perpetrators of violations against civilians. MONUC’s support has, therefore, triggered strong reactions from humanitarian actors. At the same time, MONUC’s mandate for protection of civilians was substantially developed a couple of years ago to the point of presently allowing many types of operations (purely military or mixed civilian and military) in order to improve the protection of civilians (such as patrols, mobile bases, etc.). This positive evolution of the mandate, partly made possible by humanitarian and human rights organizations’ constant advocacy efforts, makes the

force’s role in DRC one of the most experimental in the world in the field of civilian protection. Therefore, DG ECHO may consider establishing a more defined policy on this issue in order to positively influence a debate which seems to be at a cross-road.

III.2. Alignment with transition plans for Eastern DRC

106. Transition in eastern DRC is governed by two strategic plans: the STAREC and the I-SSSS, the UN and partners’ plan in support of the STAREC.
107. The overall goal of the STAREC is to stabilise eastern DRC by improving the security environment and restoring the state’s authority in areas formerly controlled by armed groups, and simultaneously facilitate the return and reintegration of IDPs and refugees and to foster economic growth. The STAREC Plan has three components: 1) security; 2) humanitarian and social; and 3) economic growth. Both the security and humanitarian/social components include highly significant protection objectives (“Prevent exactions against civilian populations” for the security component and “protection of civilian populations” for the Humanitarian/Social). UNHCR and other UN agencies are strongly involved in the implementation of STAREC, particularly from the perspective of the return and reintegration of returnees. DG ECHO staff sometimes participates in the STAREC coordination structure, which, at the moment, appears to have a structure that is quite vague and yet to demonstrate its operational character.
108. The I-SSSS is even more focused on protection, as shown in the table below. Again, UNHCR and other UN agencies are involved in the protection of civilians, in the facilitation of return and reintegration, and in the large component dealing with sexual violence.

I-SSSS components relating to protection:

Improve security		
1.1.	Strengthening of FARDC capacities	MONUC SSR
1.3.	Reintegration of combatants	UNDP
1.4.	Protection of civilians	MONUC POC / UNHCR
Strengthen the State		
3.2.	Support for deployment of the police	UNPOL
3.3.	Support for the deployment of justice personnel	MONUC Rule of Law
Facilitate return, reintegration and recovery		
4.3.	Local peace-building, reconciliation and conflict resolution	UNDP/UNHCR
Combat sexual violence		
5.2.	Protection and prevention	UNHCR
5.4.	Multi-sector assistance	UNICEF
5.5.	Data and mapping	UNFPA

109. It should be recalled that STAREC is only applicable in the six short axes which are officially declared as stabilised, which amounts to a very small (yet populated) portion of the territory. However, in the rest of eastern DRC, widespread violations against the civilian population continue with impunity and, in many cases, behind closed doors. Emergency needs and humanitarian response are likely to remain here for quite some time.
110. Generally speaking, despite past and ongoing donor efforts, evidence suggests that development aid in DRC is not having an effect on humanitarian needs and that concern remains about the Government’s effectiveness on the various fronts of governance, economic growth and provision of basic social services. Therefore, as in the past, responding to protection needs in DRC will continue

to require a combination of approaches in which both development efforts and humanitarian assistance will coexist and even target the same areas. Consequently, most partners felt that DG ECHO's presence in DRC will be necessary for additional years, although more optimistic views were expressed. In any case, it will remain important for DG ECHO to identify partners that can opt for development funding or engage and work well with actors implementing development protection programmes.

III.3. Coherence and complementarity with other donors

111. According to key informant interviews (OFDA and DFID), other donors appear to be confronted by difficulties similar to those of DG ECHO such as the exact content and boundaries of protection. Similar to DG ECHO, OFDA gives preference to listing the type of projects it is ready to fund without examining whether or not such projects correspond to a precise definition of protection. DFID London is presently working on a worldwide policy document on protection that should soon be released, and will aim for a more precise understanding of the concept⁶. Both donors agree on the need to find ways to “operationalise” protection rather than to get lost in concepts that are too theoretical. Protection by presence was deemed useful, especially in Haut-Uélé, as well as was the respecting of the “do no harm” principle, which OFDA controls in the implementation of every project. There is also agreement on the fact that the role of humanitarian players in actively preventing violations against civilians appears relatively limited. Both agencies rely quite heavily on the expertise of the major protection mandated agencies. DFID insisted on the difficulties linked to prioritisation of protection when faced with the diverse methods that are supposed to achieve it, such as military action, judiciary action, issues of the monitoring of violations or dealing with concrete cases of sexual violence. These difficulties are compounded by the magnitude of the protection needs in DRC. Finally, the issue of MONUC's dual mandate was raised during the interviews regarding its complex consequences for humanitarian players.
112. Geographical coordination for assistance programs has been successfully addressed in DRC. In some places, ECHO shares partners with other donors in order to assure the coverage of wide areas. Eventual protection-oriented activities could benefit from this coordination. In the health sector, development donors (including EU, EDF, DFID, USAID, WB and ADB) have traditionally arranged areas of intervention in a coordinated way, allowing for some room for planning for disengagement of DG ECHO activities. The shrinking of funds and the latest decisions made by development instruments of the EU on concentrating in some areas, abandoning others previously envisaged, can affect DG ECHO's prospective phase out plans.
113. DG ECHO should increase its interactions on protection with other donors, given the magnitude and the difficulties of issues to be dealt with in this sector.

III.4 Connectedness with other EC/EU programmes, from a transition angle

114. The evaluation team has been asked, in order to shed light on transition issues, to briefly describe how protection is being transformed when moving from an emergency to a development situation.
115. In an armed conflict emergency situation, protection of civilians is mainly governed by International Humanitarian Law and Refugee Law. Interventions of humanitarian players primarily aim to protect civilians from armed forces and groups from the direct and indirect effect of the use of military force

⁶ DFID London was contacted without success by the evaluation team in order to try and get an advanced copy of the document.

to achieve military objectives (legal or illegal). Humanitarian players are often left with no other means to achieve protection than to liaise with legal or illegal armed forces to ask for respect of the civilians (often considered to be enemy civilians), or to advise or support populations in their best interests. Protection interventions often relate to groups of civilians rather than individuals. Priority is given to the protection of the most fundamental rights such as physical integrity, prohibition of arbitrary arrests, prohibition of bad treatment or torture, access to basic health, and water and food. Protection also addresses typical armed conflict situations and needs, such as massive displacement of civilians inside or outside of the borders and establishment and management of camps. Access to populations will, in many cases, be limited by security risks linked to armed confrontations.

116. In a development situation, civilian authorities are in charge of protection. Issues will be primarily related to protection of the population from their own authorities and not from enemy forces. Humanitarian, human rights or other players will rely mostly on Human Rights Law and Refugee Law. Protection will extend beyond the core of human rights to deal with a much broader series of rights, such as civil and political rights or economic, social and cultural rights. Protection will relate mostly to the reconstruction of, and support to, structures or systems (restoration of rule of law and good governance) and will also deal with individual cases. Players will primarily interface with police and judicial authorities, but also with other administrative and political authorities. Access to victims will no longer involve security risks.
117. Finally, and not surprisingly, transition situations like the one now prevailing in DRC present a mixture of all of the aforementioned characteristics, with geographical areas still more concerned with emergency protection situations and other already dealing with reconstruction and development.
118. Transition appears to be a particularly relevant topic for DRC. Protection happens to be one of the most typical transition sectors. Therefore, the members of evaluation team have reviewed a series of issues which are, in its opinion, of such a nature that allows for potential cooperation between DG ECHO, DG DEV and EuropeAid on programmatic transition solutions.
119. As previously mentioned, **mediation on land issues** is presently considered by UNHABITAT and UNHCR to be a crucial component of a joint UN project on the return of IDPs and refugees. The same goes for **reconciliation processes**. Both issues appear to be particularly relevant for potential cooperation on LRRD between DG ECHO and other EU services.
120. **Building FARDC and PNC capacities to protect**, including payment of salaries, provision of shelter, training etc. should and will continue to be looked after by development players. The 10th European Development Fund (EDF) plays a very significant role in this regard with the objective of supporting the restructuring and the reform of the police (C1a, R1 to R4). The European Union Police Mission (EUPOL), which is funded by the Council and runs on very short renewable budgets, has also gained quite a lot of clout in supporting restructuring and reform of the police. Finally, the European Communications Security and Evaluation Agency (EUSEC), also funded by the Council, is involved in supporting Security Sector Reform (SSR) on the FARDC side and carries out the crucial task of monitoring and supporting the salary payment chain.
121. However, DG ECHO should reflect, together with other EU bodies, on the very crucial role that could be played by humanitarian players in this sector. Indeed, humanitarian players are the main, if not the only, players working in many areas where FARDC and gradually PNC have presence. They already play a significant role in monitoring and reporting of violations committed by these bodies, mainly through the protection cluster, and can and will also be the direct witness of the potential progress made by FARDC and PNC towards shifting their role from a predatory to a protecting force.

122. From information collected from key informants, EUPOL and EUSEC are very limited in their presence in the field (logistics and security) and MONUC depends quite a lot on information provided by humanitarians in this regard. In addition, programmes of protection against sexual violence and protection of children or detainees can also bring direct and very useful indications of the potential improvements in the treatment of victims. It is quite symptomatic to note, in this regard, that one of the two main indicators used by the ICRC to monitor protection of the civilian population is the “improvement of living conditions for soldiers and police units involved in armed operations, as well as for their families”⁷. This seems to confirm the fact that ICRC sees a determinant role for humanitarian players in monitoring concrete SSR aspects in the field.
123. Another major pillar of action for the tenth EDF is the support of the rehabilitation and reinstatement of the Justice System (C1a, second long term national objective). If support to justice is clearly a development issue, the **protection of detainees** can be viewed differently. The release of detainees that are massively imprisoned arbitrarily is de facto in an area where emergency and development players are already collaborating and should increase their joint efforts. The **REJUSCO program** to restore justice in eastern Congo, partially funded by the EU and presently closed until the start of a second phase in 2011, includes a component providing for a follow-up on trials and detention areas by a significant number of national NGOs. One of the main objectives of this component is precisely to limit arbitrary detention and the ill treatment of detainees. Another substantial activity provided for another component was the development of so-called “penitentiary gardens” in order to feed under-nourished detainees. As it is well known, both types of activities are also traditionally carried out by a humanitarian player, the ICRC. Notably, the ICRC has also developed a programme of feeding for under-nourished detainees, yet limited to urgent and severe situations. This provides further indication of the potential of Linking Relief rehabilitation and Development (LRRD) cooperation on issues of the protection of detainees.
124. **The reintegration of former combatants into civil life, particularly CAFGAs (child soldiers)** has been mentioned by some interviewees as a key component of peace-building and stability in the East. This is again a field in which humanitarian programmes can be linked with development. It was mentioned above (under point 3) that UNICEF and SCF were facing an alarming shortage of funding for the reintegration of CAFGAs. Leaving disarmed CAFGAs without the possibility of socio-economic reintegration presents a huge risk of re-enrolment in armed groups and of the exploitation of these children in child labour..
125. Humanitarian assistance programmes are often used in other contexts to put youth back to work, particularly former combatants, through labour-based infrastructure projects. Within the framework of the joint UN program on promotion of inter-community dialogue and preparation for the return and reintegration of refugees and IDPs in eastern DRC, WFP will be involved in providing food vouchers for all activities of training, construction and social cohesion projects. DG ECHO should also explore these possibilities.

III.5. Coordination on protection issues

Role and effectiveness of the Protection Cluster and attendance of partners to the meetings

126. A special Annex G of the evaluation is dedicated to the issue of the protection cluster. The cluster was established recently and has the most complex structure of all clusters. Interviews with partners and key informants showed that players who consider themselves as having a protection mandate

⁷ Project 2009/01025.

were regularly following sessions in the protection cluster, whereas others did not come at all or tended to come only when they had a significant piece of information to share. This is hardly surprising in light of the numerous meetings in which humanitarian players have to participate in eastern DRC. Players short of staff tended to favour participation to assistance clusters such as WASH in which they were specialised, rather than in protection which they considered less directly useful.

127. The establishment of meeting agendas appears to be an especially complex task in view of the diversity of topics that need to be examined. The functioning of the cluster is, therefore, often slowed down by the quantity of issues. Yet, the cluster appears not to be able to perform its most significant functions, which can be considered the provision of a comprehensive overview of the ongoing protection interventions, the collection and consolidation of information on protection incidents from all humanitarian players and the drafting of joint advocacy documents to the actors responsible for violations or in a position to influence said actors. The effectiveness of the cluster is reviewed in more detail in Annex G, notably in light of DG ECHO’s decision to fund the cluster’s co-lead.
128. Although this issue could not be documented in depth, it was generally felt by the evaluators that protection issues were not often raised among donors. For instance, another donor is specifically working on protection guidelines and it would be interesting to determine whether some staff in DG ECHO is aware of that point.

External or internal coordination about protection

129. Coordination between DG ECHO field staff, partners and non-partners on issues of protection were strongly linked to the level of knowledge, interest and training of the staff involved. Globally speaking, it seemed that dialogue between these players on such issues could be further formalised. Additionally, it seemed that a more adequate operationalisation of the protection guidelines to the context of DRC was needed.
130. Coordination between DG ECHO and other services of the EC or the EU, although globally good, needs further strengthening. For instance EUPOL and EUSEC, which are attached to the Council, appear to have hardly any contact with DG ECHO, although they are dealing indirectly with the same protection concerns. In addition, cooperation on transition issues between DG ECHO and other services of the EC/EU could be more systematised, as mentioned under II.4.

III.6. Main Conclusions / Strategic and operational recommendations

III. Alignment, connectedness and coordination	
Main conclusions	Strategic and operational recommendations
Alignment of DG ECHO with national humanitarian, protection and transition plans	
1. DG ECHO alignment or non-alignment with the UN System-Wide Strategy for the Protection of Civilians is difficult to judge. Yet, one of the issues which would require positioning from DG ECHO appears to be the cooperation between humanitarian players and a peace-enforcement force on issues of protection of civilians.	
2. Transition plans such as STAREC or I-SSSS include many and significant components of protection.	1. DG ECHO should closely follow the implementation of STAREC and I-SSSS, jointly with other donors given the number and significance of protection components of these

3. Many agencies such as UNHCR are significantly involved in the implementation of STAREC or I-SSSS.	two transition plans.
Coherence and complementarity of DG ECHO interventions with other donors	
4. Other donors appear to be confronted by difficulties similar to those of DG ECHO such as the exact content and boundaries of protection.	2. DG ECHO is encouraged to compare its policies on protection with other major donors.
Potential for connectedness between DG ECHO protection programmes and other EC/EU service programmes, from a transition angle	
5. In the coming years, DG ECHO and other EC-EU services are likely to increase their interactions on transition issues dealing with protection.	3. DG ECHO is encouraged to regularly review with other EC/EU services issues of transition such as: <ul style="list-style-type: none"> • Emergency mediation on land issues • Early reconciliation process • Monitoring of FARDC and PNC behaviour towards civilian population • Protection of persons arbitrarily arrested • Reintegration of former combatants into civil life, in particular former CAFGAs
Dialogue between DG ECHO field staff, partners and non-partners	
6. Dialogue between DG ECHO field staff, partners and non-partners on protection issues should be further formalised.	4. DG ECHO is encouraged to further develop dialogue on protection issues between DG ECHO field staff, partners and non-partners.

IV. Effectiveness

IV.1. Objectives and activities from Global Plans (GPs) and support documents

131. A review of effectiveness should begin with the examination of the main goals and objectives in dealing with protection. The evaluation strongly supports the formulation of some protection objectives as feasible and potentially very beneficial in order to better measure effectiveness and efficiency.
132. DG ECHO's objectives are mentioned in yearly GPs. The evaluation team is aware that GPs tend, for various reasons, to remain flexible in their formulation, at least at the objective level. Still, there is such a discrepancy between protection and assistance at every level (objectives, activities, justification in the support documents), that a short review of global plans and support documents from 2006-2010 is useful.
133. This review indicates that the type of objectives and activities included in the plans has remained extremely stable and focused on the same sectors throughout these years. GP 2009 and GP 2010 include identical principals and specific objectives. The **common principal objective** is assistance driven: "To provide assistance to the vulnerable populations affected by the complex crisis in the Democratic Republic of Congo". The review of the **three specific objectives** for 2009 and 2010

focuses mainly, if not exclusively, on assistance and does not express any further indication of results to be reached in protection⁸.

Principal (PO) and specific (OS) objectives in Global Plans 2009 and 2010

PO	To provide assistance to the vulnerable populations affected by the complex crisis in the Democratic Republic of Congo.
OS1	To provide displaced people, returnees and targeted vulnerable host communities with an integrated multi-sectored package of assistance in order to reduce mortality and to promote stabilisation, resettlement and the re-establishment of basic livelihoods.
OS2	To provide appropriate and adequate food assistance to safeguard and improve the availability of, and access to, food for vulnerable populations affected by the crisis and to stabilise and improve their nutritional status.
OS3	To strengthen early warning and rapid intervention systems.

134. OS1 mentions an “integrated multi-sectored package” which should serve to stabilise and resettle IDPs. As the process of return and reintegration of refugees and IDPs traditionally includes some protection activities, one might imagine that it hints at protection activities. OS2 focuses on food assistance and OS3 on the early warning and rapid intervention systems when dealing with health and nutrition alerts.
135. A review of GP 2006 to 2008 confirms that all of the objectives are assistance driven, although the wording slightly differs from GP 2009 and 2010.
136. The review **at the activity level** in the GP 2009 and 2010 shows two types of activities relating to protection: “sexual violence” (1.5) and “transit and protection of refugees”. GP 2008 has the same content as far as protection is concerned (i.e. is limited to the two activities just mentioned). In 2006, “humanitarian demining” and “support to protection” were mentioned alongside sexual violence and protection of refugees. The reference to “support to protection” disappeared in 2007 and “humanitarian demining” in 2008.
137. The support document to the GP 2010 includes quite a few references to protection. Firstly, it includes substantial descriptions of the type of attacks and violations to which the civilian population is exposed. Secondly, it clearly emphasises that “security of civilian populations remains the most significant need, especially if one takes into account the renewed exactions against populations, including sexual violence”⁹. It also refers to the “need to develop in the Orientale Province and the

⁸ The team was only provided with the French version of the Global plan for 2010. The three specific objectives are the following:

- I- Fournir un ensemble de mesures d’aide intégrées aux populations déplacées, rapatriées et aux populations d’accueil vulnérables ciblées visant à réduire la mortalité excessive et à promouvoir la réinstallation et le rétablissement des moyens de survie de base.
- II- Apporter une aide alimentaire appropriée et adéquate pour protéger et améliorer la disponibilité et l’accès à la nourriture pour les populations vulnérables affectées par la crise, ainsi que pour stabiliser et améliorer leur statut nutritionnel.
- III- Renforcer la coordination et les capacités d’alerte et de réponse rapide pour répondre à des crises humanitaires.

⁹ « Le besoin le plus important reste la sécurité des populations civiles, surtout avec la recrudescence des exactions sur les populations, parmi lesquelles figurent les violences sexuelles ».

Kivus a full range assistance program *including significant protection components* to help vulnerable IDPs and host communities affected by the conflict¹⁰.

138. The review of the GP 2010 shows an apparent disconnect between the concern expressed on protection needs of civilian populations (security mentioned as the most significant need) and the lack of objectives expressly mentioning protection. In addition, protection objectives and activities of protection mandated agencies' projects such as ICRC, UNHCR, OCHA or UNICEF, as well as protection projects envisaged by partner INGOs, do not seem to be sufficiently reflected in the document.
139. Reasons for this disconnect are likely to stem from a series of complex factors. It is possible that an analysis of protection issues and eventual strategies by technical experts in the field do not find their way into the support document of the decision, where assistance-oriented narratives are given pre-eminence.

IV.2. Protection projects with protection results or activities

140. As already mentioned in the introduction, effectiveness, impact can only be measured in projects which include clearly identifiable results, components or activities. A review of the project portfolio shows that, except for the funding of the protection mandated agencies, DG ECHO does not appear to fund enough projects which include protection results or clearly identified protection components. Therefore, the evaluation will be limited to a detailed review of the principles of these projects.
141. In practice, **SGBV projects** appear to be the main category of standard protection projects. Protection is, however, a small part of the case management response that DG ECHO supports for these types of violations. The evaluation team has doubts about the overall impact of the SGBV actions in general, including those funded by DG ECHO, and this remark could be extended to other donors' efforts. Effectiveness, however, can be judged as good, as partners reach and even surpass planned targets. Some questions could be raised in terms of quality of services provided. Other than the referral centres in Goma and Bukavu (effective in terms of caseload attended and services provided) the opinion of the evaluation team is that the strategies are not as effective as they should be at the community and Health Zones level to deal with the causes and consequences of SGBV. The nature of the problem, the adequate approach, the coordination and the integration of the different elements that could be involved are issues that are far from being solved satisfactorily at the field level, where women are still unable to overcome the circle of stigma, close-in gender management, limited scope and overall constrictive conditions in DRC. The overall result is that few women reach care in time, that some of the cases are probably false positives of women in need of gynaecological care and that the circle of impunity and lack of reparation remains largely unchanged. DG ECHO is rightly trying to integrate SGBV case management in the existing health system, reinforcing services where necessary and trying to avoid vertical programs.
142. Some limitations also appear in the overall effectiveness of the SGBV response by the international community.
143. The first limitation is the lack of systematic and reliable data of the phenomenon and its contributing factors. This affects the eventual dimension and adequacy of the response, the necessary adaptation to

¹⁰ « En Province Orientale et dans les Kivus, un programme complet d'assistance humanitaire, incluant des volets importants de protection, sera nécessaire pour venir en aide aux déplacés et aux populations d'accueil vulnérables affectés par le conflit ».

different contexts and profiles of SGBV. This also affects the issue of coverage, where a more fundamental gap analysis is needed. DG ECHO is clearly advocating for this deficit of data to be addressed, and the evaluation was unable to uncover why the UN mandated agency (UNFPA) does not provide more resources and capacity to address the issue. As mentioned in the SGBV section, the mapping exercise carried out by UNFPA in 2008 on availability of services in five provinces only got 55% of responses from health zones, and a nationwide overview is still lacking. Moreover UNFPA has been charged with the responsibility for data analysis within the STAREC mechanisms; better integration and coordination of existing data systems is going to be critical.

144. The issue of **timeliness** also requires some attention: As reaching victims within the first 72 hours of a violent episode is a major focus, and since this is rarely attained, a reflection on alternatives and a better understanding of the factors affecting late reporting is advisable. DG ECHO is already addressing this issue and some partners have studied the factors influencing late reporting. Results show the need to better market services and improve their quality, among other needs. Integrating the currently atomised reproductive health programs and increasing community outreach of such programmes would probably help both in reaching victims and in preventing gender-based abuse. The evaluation has found, in some cases, a lack of an information system and adequate systematic case management and referral and the persistence of a stigmatised attitude that, while intending to protect the victim is actually limiting her/his access to care. The availability of PEP kits is uneven, and their utilisation seems erratic and dependent on the presence of an external supervision staff. In some cases, patients are referred to distant structures to receive the PEP. In other cases, the exceptional occurrence of a victim arriving within 72 hours challenges the capacity and adequacy of the system (protocols are not well known and PEP can be even expired in these cases). As for the content of the PEP kit, whether or not the integration of Hepatitis B vaccine could be considered should be examined, given the high prevalence in this African region. Additionally, a concerted decision should be made, given the budgetary consequences and technical requirements that this entails. The protection component in the health care case management, case identification, forensic examinations, judicial claims and prosecution of perpetrators is weakly addressed, including those aspects of community awareness that could improve the prevention and the response.
145. The performance and capacities of DG ECHO partners is uneven in SGBV. Some partners are too accepting of the limitations of the Congolese health system in terms of access to services, quality of care and availability of drugs. NGOs are present in the field for long periods of time and those dedicated to the processes of LRRD tend to neglect an adequate integrated case management. Other NGOs are specialised and heavily involved in the issue of SGBV, supporting referral centres and having a vertical program approach even if apparently providing integrated services. When including protection, they would not mention it in a DG ECHO proposal. Partners with outreach capacity and community mobilisation capacity offer a more integrated portfolio, although caution should be exercised to identify opportunistic behaviours prompted by the high interest value of SGBV among donors.
146. Most DG ECHO partners in the field frame protection weakly in their SGBV programs. This is actually a reflection of the structural weaknesses in properly addressing the protection of SGBV victims in DRC. Lack of leadership, confusion on data reporting and confidentiality issues, and the recent multiplication of fora and working groups in the context of the STAREC affect the clarity of protection measures by partners.
147. Several partners have been involved in **road rehabilitation/reconstruction**, which can have significant effects on the protection of populations. However, the evaluation concluded that effectiveness of this type of projects is not always optimal. Most often, maintenance of roads is not assured and can even be the source of conflict. In addition, the protection value of the road can

sometimes be jeopardised by commercial and political determinants. Moreover, the rehabilitation component has often been entrusted to partners that lacked the technical skills to carry out such a task. Finally, torrential rains will almost certainly damage the road at regular intervals and necessitate rehabilitation work. However, the evaluation team is of the opinion that none of these difficulties should be considered insurmountable if the repair of the road is the best option for improving the level of protection of isolated populations.

148. Generally speaking, the effectiveness of **protection by presence** needs to be better documented. This notion simply means that the simple presence of humanitarian staff in an area, without regard as to the type of project implemented, is of a nature to cause some decrease in the tensions prevailing in the area. Yet, the only performance of assistance activities generally does not provide much indication of protection effectiveness. The introduction of specific components of protection in assistance projects might greatly facilitate this aspect. In addition, it is not rare in DRC that NGOs retreat from an area for some time due to security conditions, leaving the populations on their own. The evaluation team recorded episodes of this type in Baraka, Fizi and the Plateaux in South Kivu. This shows the limitations of the concept and the dangers linked to a “false” sense of security that international presence provides when not properly managed and integrated with a perspective on protection of civilians.
149. Other activities funded by ECHO within assistance programmes include those to monitoring and sensitisation in IDPs camps and “go and see” to return sites, normally under the umbrella of UNHCR, also including the identification of unaccompanied children and reporting to the protection cluster. Some of the returns expected to South Kivu did not take place due to the deterioration of the security situation, but partners seem to have used the resources to support returns to other areas.
150. In **WASH** interventions, some partners have defined some criteria on safety and maximum distance of water points to households. This is positive and should be generalised within the sector. The field visit findings demonstrate the need to address some limitations in the gender composition of community groups making decisions about WASH issues.
151. In regard to the activities targeting **people living with a handicap**, although relevant from the assistance point of view, the evaluation found a more limited sense from the protection angle, as they are not tailored to address the needs of victims of violence. We could estimate that a maximum of 20 percent of the people living with a handicap, benefitting from the project, were handicapped as a result of violence. No specific protection aspect is foreseen.
152. DG ECHO supports the **multi-sectoral assessment for the response to movements of IDPs or returnees**, and this includes an assessment of protection circumstances, which is critical for assuring an adequate protection angle to assistance, including the “do no harm” analysis. In some cases, and very much dependent on the leadership at local level of the protection cluster, we found some evidence of confusion around the concept of “do no harm”, utilised in a way that actually made response to needs more difficult. “Do no harm” should attempt to find ways to assist while minimising risk for beneficiaries, but in some cases was found to be used to justify a lack of action.
153. The provision of **cooking fuel** to targeted families is one of the rare cases in which measurement of the improvement was included in the project and represents a good example of how to include protection outcomes in the logframe.
154. Some components of **food security projects** dealing with mediation could be better articulated and partners should be asked to provide means of verification of possible positive outcomes.

155. In addition to the above, DG ECHO is committed to funding **coordination capacities** in DRC, including support to OCHA and the protection cluster. The identification of this need, and the decision to support an NGO to play the role of co-lead of the protection cluster, is strong and is coherent with identified weaknesses in this respect. The support of joint assessment teams and civil military liaisons are also contributing to the improvement of protection instruments.
156. Improving family links, reunification of children, improving conditions of FARDC and Protection of Civilians (POC) families are also supported by DG ECHO with a protection component. These activities are to be considered effective as partners reach targets, while the protection achievements are normally difficult to gauge.
157. Support to the health sector is very important and encompasses the protection component of SGBV case management (see above) and the rapid reaction capacity that also includes emergencies caused by the conflict, the war wounded and the displaced. Information management and advocacy are important parts of those interventions. The data reliability problem is addressed elsewhere (SGBV section) and has already been mentioned above. The great challenge for the health sector is actually the establishment of a handover strategy that could respect the free access to quality services for victims in need of care and protection.
158. Of particular interest is the 2010 funding of activities aiming at the establishment of Community Protection and Action Plans (CPAP) and at the facilitation of interactions between military and civilian stakeholders on protection issues. This community-based approach could well suit ECHO's mandate¹¹.

IV.3. Monitoring of protection results and impact

159. In the Terms of Reference, DG ECHO has raised a number of questions dealing, in general terms, with effectiveness and the impact of protection activities. Issues were raised such as measurement methods of progress for protection activities, means and indicators that could be used in this regard or factors of success and failures. The FGHP includes an annex dealing with indicators. However, this annex is not systematic enough to provide complete guidance on protection indicators.
160. A global review of DG ECHO's policies is likely to reveal well-entrenched practices such as the need to focus on **“saving lives”** or the establishment of very detailed monitoring and reporting procedures. Therefore, it indeed seems opportune for DG ECHO to reflect on the different nature of protection compared to assistance in terms of results. As already evidenced in DG ECHO's humanitarian protection guidelines, the objective of saving lives in protection might be considerably more difficult to reach than in assistance. In cases of military attacks against civilians, saving lives can usually only be achieved through military protection. Humanitarian protection, as already discussed in the introduction, can only achieve results when a number of positive circumstances are fulfilled, such as access to population in need of protection, will or power of authorities to agree to some degree on cooperation, etc. Additionally, as explained below, impact indicators might be set in certain areas of protection, but might remain illusory in others, where only process indicators could be used¹². In other terms, protection might be guided by slightly different methodological principles than assistance. Whereas assistance is most often only **“results” oriented**, protection might be driven by slightly

¹¹ Oxfam and Search for common ground have developed projects in this field which are not funded by DG ECHO (Oxfam is funded by the Commission). Conversely, Danish Refugee Council is also involved in a CPAP in Haut Uélé financed by DG ECHO.

¹² A quantitative indicator for violations committed by numerous armed elements in a vast area might be impossible to implement, which might necessitate resorting to “qualitative”, subjective and much less precise indicators such as the “feeling of security or insecurity” among general population.

different principles such as the duty or responsibility to “try” to protect. This factor might explain the initial reluctance of some donors to fund certain protection activities. This does not mean that protection should not be results driven, but rather that more flexibility should be sought and adopted when dealing with the type of indicators, impact, constraints and opportunities.

161. A review of means to monitor protection shows that all responsive or remedial activities which reach protection objectives through assistance activities or through other types of action performed after the occurrence of the violation(s) are likely to be monitored through **performance indicators** in a very similar way to “pure” assistance activities. In such cases, measurement of results will even be more accurate when the *post violation(s)* assistance activity is provided to individual victims of protection rather than to groups of individuals¹³.
162. More complicated issues tend to appear when protection must be implemented through **prevention activities** (i.e. *ante violation(s)* activities). This is what is sometimes referred to, and rightly so, as “pure protection” activities. There, monitoring is made through **process indicators**¹⁴, or through **qualitative indicators** such as “the feeling of security” or the “lack of fear” etc. The use of quantitative indicators would be preconditioned by an impeded access (both in terms of risks for international staff and in terms of logistics) to all areas where violations are or were happening, which is rarely possible, and the introduction of an effective and global monitoring process (very difficult too, although resorting to national NGOs seems to work in contexts like DRC).
163. The discomfort linked to protection activities lies precisely in prevention activities. These activities are undoubtedly of a nature that causes the most satisfying result (the prevention of violation(s)) but are also more difficult to measure, hence the constant hesitation of donors in this regard. According to DFID, the lack of performance indicators is one of the key reasons that donors have been questioning funding of protection projects through the pooled fund in DRC. This issue has also been raised a number of times by DG ECHO to the ICRC in DRC, with the result being that issues were declared to be of a confidential nature by the ICRC and, therefore, could not be disclosed¹⁵.
164. The evaluation team is of the opinion that DG ECHO, possibly together with other donors, should develop standard (process) indicators to monitor **prevention activities** and, at the same time, identify process results which are the most indicative of success. For instance, violations monitoring is generally easier than advocacy. Consequently, a good process indicator would be the number of oral and/or written interventions carried out. The type of interlocutors addressed in advocacy activities is also a very important qualitative factor. Advocacy to Mai Mai armed groups in Shabunda is obviously much harder than advocacy with MONUC military in Bukavu. Additionally, monitoring and advocacy, generally speaking, are more difficult to achieve than pure sensitisation or dissemination activities that tend to multiply.

IV.4. Establishment of a centre of expertise in protection and training of staff in protection

165. Some DG ECHO staff has expressed the desire to receive increased training in the field of protection. Generally speaking, there is quite a bit of interest in questions of protection within DG ECHO and motivation for being more involved in such issues.

¹³ Number or CAFGAs extracted from armed group or forces, number of victims of sexual violence having received medical treatment or surgery, number of mines identified and/or deactivated etc.

¹⁴ Such as the number of sensitization meetings, number of advocacy meetings or advocacy written interventions, etc.

¹⁵ Project 2009/01025.

166. Such an approach should start with the establishment of a more comprehensive **centre of expertise in protection**, including a protection specialist within the policy unit and a sector expert on protection at the RSO level. As mentioned above, this centre of expertise could develop, on the basis of the FGHP, an expanded list of the type of protection projects which could be funded by DG ECHO. It could contact counterparts of other donors in order to exchange views on protection (for instance, DFID is presently working on a protection policy document as well). This centre could also further refine and streamline the FGHP as discussed above. Partner staff would also clearly benefit from this centre of expertise.
167. In addition, partners could hire staff with a protection background, creating a network of expertise among partners and resulting in an enhanced identification of protection needs, partners and projects in the field. DG ECHO could consider funding these protection focal points for eligible and limited partners.

IV.5. Other general aspects of effectiveness of protection in DRC

168. In terms of partners, an important factor for effectiveness in protection in DRC is the **quality and capacity of local organisations**, although DG ECHO can only contract them indirectly. The evaluation has evidenced the generally good capacity of local partners, probably well-trained after years of external NGO presence and lack of institutional counterparts. The need to avoid or limit opportunistic behaviour is important, but in general terms, the potential for local partners in the area of protection has still to be fully exploited.
169. Timeliness of protection action is obviously a key characteristic to putting a stop to violations and to address the immediate effects of violence (evacuation of wounded, establishment of temporary shelters etc.). Unfortunately, major protection needs are generally linked to a total lack of access by humanitarian players generally due to security reasons, and this is where the role of a peace-keeping troop comes into play in order to protect. DG ECHO is clearly committed to addressing access and rapid response to victims in assistance, to support specialised partners and to create specific instruments, which could also facilitate the speed of protection response.
170. The effectiveness of advocacy will also very much depend on a series of crucial factors such as the will of the authorities to protect or their capacity to do so. In many instances, and particularly in DRC, military officers would make the case that they lack real authority over their men to have orders respected, which might also be an excuse or even a lie.

IV.6. Main Conclusions / Strategic and operational recommendations

IV. Effectiveness	
Main conclusions	Strategic and operational recommendations
Objectives and activities from global plans and support documents	
1. GPs 2006 to 2010 do not include any principal or specific objective dealing directly or indirectly with protection.	1. Within the consultation process leading to the adoption of GPs, DG ECHO should include a standard section on protection in order to stimulate debate about better define protection objectives and related activities.
2. GPs 2009 and 2010 only include two types of activities on protection: “sexual violence” (1.5) and “transit and protection of refugees (4), in a total of 14 activities.	
3. DG ECHO shows a strong interest in protection in support documents, but they are	

not translated into objectives or activities.	
SGBV	
4. The weaknesses of the DRC health system limit access to services by victims of violations.	2. Medical services and psycho-social care need to be well-established and easy to access at the primary care level as well as integrated in comprehensive sexual and reproductive health services accessible for all women.
5. Vertical programmes and parallel service provision to victims, which have been put in place in some cases, are likely to divert resources and to incentivise opportunistic behaviour.	3. The establishment of vertical and parallel systems should be avoided.
6. Reproductive health programmes are atomised and suffer from the poor quality of the health system. In many cases victims ignore availability of services, in other cases quality has to improve to make them adequate.	4. Establish quality standards for reproductive health services, assuring access to target groups (facilitate geographical access and assure free access), and adequately market these type of services, assuring awareness of its existence and adequacy of the offer to the demand.
7. In some cases, DG ECHO and partners have identified complex factors affecting access and use of available services. In many cases, there is still a limited understanding of the factors affecting low utilisation and causing late access is still the case.	5. Outreach and access to victims should be assured through specific strategies in rural areas while the problems limiting access in areas where services exist should be addressed.
WASH	
8. Most agencies use ad hoc protection rules within WASH interventions, and gender balance for deciding on security issues is not always assured at community level.	6. WASH interventions should include standards related to protection and assure a gender balance in community participation.
Protection by presence and rehabilitation of roads	
9. Protection by presence is not sufficiently documented.	7. Partners should be encouraged to monitor and report on the positive and negative effects (do no harm) of their presence on the protection of populations.
10. Effectiveness of road rehabilitation/reconstruction components or projects is not always optimal.	8. Enhance situation analysis, community involvement and contact with local actors to assure pertinence and adequacy of road rehabilitation/reconstruction components. Involve technical capacities for public works in this field.
List of indicators on protection	
11. The FGHP includes an illustrative annex on protection indicators (Annex 2). With further efforts of collection of good practice and systematisation, this list could be developed into a standard list of protection indicators.	9. DG ECHO should develop a list of standard indicators, on the basis of Annex 2 of the FGHP, for each type of protection projects included in the list of protection projects to be funded (Annex 1 of the FGHP). Where necessary, for instance for prevention projects, DG ECHO should examine how process indicators could usefully complement performance indicators. Partners, especially mandated agencies, should help further define indicators on protection (reference to ICRC partnership evaluation recommendations)
Internal training course and centre of expertise in protection	
12. DG ECHO staff in HQ and in the field wish to increase their knowledge and technical expertise on protection issues and this will contribute to a better identification of protection needs, partners and projects in the field.	10. DG ECHO should ensure a regular basic training course on protection issues for field and HQ staff.
13. There is a need for the establishment of a more comprehensive centre of expertise in	11. DG ECHO is encouraged to establish a position of protection sector expert at RSO level and develop a centre of

<p>protection, including a protection specialist within the policy unit and a focal point on protection at the RSO level.</p>	<p>expertise in protection.</p>
<p>Protection staff for partners</p>	
<p>14. Only few partners have dedicated staff for protection aspects of assistance programmes, and there is some reluctance to fund such posts if they are not related to assistance results.</p>	<p>12. DG ECHO should facilitate partners hiring staff with a protection background, both at field and at HQ level.</p>
<p>Local NGOs</p>	
<p>15. Protection operations in DRC have revealed the presence of numerous competent and reliable national NGOs in the field of protection.</p>	<p>13. Where necessary, DG ECHO should consider indirectly contracting local NGOs to implement protection projects through direct funding of partners.</p>

V. Efficiency

V.1. Findings

171. DG ECHO is already acknowledged as an efficient minded donor. The close monitoring and field-based discussions allow for an adequate allocation of resources for the operations. It is difficult to analyse the utilisation and adequacy of resources deeper than that established in the internal processes of discussion between partners, TAs, RSO experts and HQ. The approach of unit costs proves useful in many cases; the procurement in “centrale d’achat” and the operational capacity support are all generally very coherent with an efficient allocation and utilisation of resources. This efficiency is sometimes hampered by some constraints, namely logistic or related to security, that affect the actual delivery of assistance. Significant delays, sometimes affect the relevance, efficiency and effectiveness of the operation, and ultimately the impact. This is happening to some extent in Haut-Uélé, where the difficulties met by some partners in the implementation of their programmes are having problems with operational costs.
172. It has been difficult to determine the exact amount of funding for protection within DG ECHO funded operations. The evaluation team found little mention of protection in the narratives of the budget allocations, and only in a few cases, a quantification of the allocation to protection activities. The Financial Tracking System (FTS) only captures some contributions to protection in 2009, specifically the projects of ICRC and Handicap International. This amounts to a meagre US\$1.743.353 in 2009 which seems insignificant (and hard to believe), representing only 2.5% of the total of US\$67 million. No specific resources are generally allocated to protection activities. This prevents efficient judgment. In some cases, the resources foreseen are very modest as are those related to community participation and awareness. With the current vague formulation of expected results in protection, the appraisal on efficiency remains elusive.
173. A closer examination of the projects funded in 2009 reveals that protection is present in a significant number of projects, and is even quantified in some. From a total funded (including DG ECHO flight) in 2009 of 53.436.701€, almost 31 million € or over 60 percent of the total financed, includes some protection components, not precisely quantified. It means that in more than half of the funding provided by DG ECHO can be traced to some protection components. The bulk of the funds are still allocated to assistance activities, but protection is an integral part of many DG ECHO funded operations.

174. The UNHCR 2009 contract has a clearly allocated 945.000€ for protection. The final report of that operation claims 1.4 million € as spent in protection activities for 18,000 returnees, although the return from Tanzania to South Kivu was actually prevented by the insecurity situation during periods of last year.
175. The ICRC contract amounted to 3 million € in 2008 and 3.5 million € plus 1 million € specific for protection in 2009. This shows a new interest in DG ECHO to differentiate protection from assistance contracts and probably requires some adaptation, both from ICRC side (for reporting) and from DG ECHO's monitoring.
176. In 2010, the trend seems to be enhanced in the sense that more protection components are taken into consideration for funding. In addition to the funding from the previous year, COOPI in Haut-Uélé develops a protection approach within their SGBV programme, and the funding of Oxfam to co-lead the protection cluster is a clear positioning into protection through DG ECHO funding.
177. In all, the use of funds in protection activities has become significant but must be more explicit and clear in the financial information of the contracts. This could be achieved through a formulation of protection activities with associated costs in the funding proposals and the contracts.
178. One aspect in which efficiency seems relevant in the context of this evaluation is in regard to the utilisation of financial resources to repair roads to improve humanitarian access and protection. This evaluation was not suited to evaluate the efficiency in detail in terms of utilisation of financial and technical resources by partners involved road repair activities. However, a general assessment could be made that relief experts may feel somehow uncomfortable when dealing with public work.
179. Such an undertaking requires specific expertise, a contextual analytical capacity, interaction with local communities/development actors/planning authorities and coherent/integrated budgets normally beyond capacities of humanitarian NGOs. The use of cash-for-work schemes raises many doubts at the field level, where the cash reaches the community, but the roads do not improve. Could the same result (or a better one) be obtained with the resources utilised? It would appear that an integrated planned effort involving the Government of Congo (GoC), provincial authorities, bilateral donors and maybe the MONUC would have had a better and more sustainable effect on access to enclave areas than did the NGO's humanitarian approach. Roads do not last long and in other cases local communities find alternative means or the stabilisation of the situation allows for the opening of new accesses previously unforeseen. NGOs are then blamed for the poor state of the roads, and ultimately this affects DG ECHO's image.
180. An analysis of costs per/km of the roads intervened shows great disparity. From the 10,000 € per km of Caritas project to the 2274 € per km of IOM, ACTED requires 3000-6000 € per km. It is difficult to establish a comparison, as conditions and operational contexts vary. In general terms, however, partners in the field question the adequacy of food-for-work or cash-for-work schemes to address infrastructure construction.
181. For their part, DG ECHO flights are not only highly appreciated, but they are also found to be a very cost effective service according to a recent evaluation.
182. Sector efficiency is beyond the scope of this evaluation. Interventions in the health sector, field security, nutrition, WASH are normally discussed in terms of unit costs and reasonable operational costs. Delays and constraints related to security issues are frequently reported.

183. Efficiency is difficult to gauge in protection related activities. Like in disaster prevention, the best outcome of a protection intervention is the absence of a violation. Resources utilised and alternative means are difficult to assess. It should be noted, however, that a more explicit description of activities related with protection and the costs involved would allow a better management of resources and a judgment on efficiency.
184. DG ECHO partners have experienced some reticence from DG ECHO to include costs of specific staff and resources for protection activities if not linked to assistance projects. As stated elsewhere, if protection results are the aim, a definition of results expected, activities related and required resources are necessary. The development of community-based protection alternatives is a field where DG ECHO partners could optimise the use of resources and the presence for assistance programmes. In general, however, DG ECHO has to assume that enhancing the protection dimension of the humanitarian response in DRC requires additional financial and technical resources.

V.2. Main Conclusions / Strategic and operational recommendations

V. Efficiency	
Main conclusions	Strategic and operational recommendations
Resources for protection activities	
1. Partners tend not to explicitly present their protection.	1. Present resources for protection-related activities should be presented in an explicit way in the funding proposals and log frames.
2. Partners have experienced some reticence from DG ECHO to include costs of specific staff and resources for protection activities if not linked to assistance projects.	2. Additional resources (human and technical) for protection activities when results and indicators are formulated should be allowed.
3. Current funding does not allow identify resources to be allocated to protection activities other than those granted to mandated agencies.	3. Based on the standard list of protection activities, DG ECHO should define the costs involved for each type of activities. This would allow for a better monitoring of efficiency.
Construction and rehabilitation of roads	
4. Relief workers tend to feel quite uncomfortable in dealing with public works.	4. Projects dealing with construction or rehabilitation of roads should include more technical and development-oriented standards and principles.
5. The use of cash-for-work schemes raises many doubts on efficiency at the field level.	5. The adequacy of cash-for-work community schemes for road rehabilitation and maintenance should be re-examined
Community-based protection activities	
6. Community-based protection activities can be related to community-based assistance activities, taking advantage of presence and knowledge of conflict situations by partners.	6. Explore extending community-based protection activities as they are likely to allow for an optimisation of resources.

VI. Impact

VI.1. Impact in general

185. DG ECHO funded operations will always pose special challenges to the understanding and gauging of impact. Permanent changes, positive or negative, that the intervention may promote are difficult to attribute due to the short term nature of the funding. However, it must be recognised that DG ECHO

operations are inscribed in a wider context and participate in a joint effort with the humanitarian community. DG ECHO is an active promoter of GHD, articulates and coordinates its programming and monitors implementation of operations that normally extend over a longer period of time. Some judgment on impact is then possible on this basis.

186. If direct impact is considered from the beginning (i.e. the impact for direct beneficiaries of the interventions), a number of positive impacts can be seen to have been achieved. For instance, the consolidation of the geographical coverage or of the overall coordination system among humanitarian actors can undoubtedly be considered direct impact.
187. The overall impact, which deals with the permanent changes in the level of needs affecting the areas of intervention is more difficult to define, and factors are beyond the control of DG ECHO and humanitarian agencies. The general opinion, though, is that the nutritional and health status is to some extent better in the East (where the humanitarian interventions are concentrated) than in the rest of the country.
188. As for the protection of civilians, DG ECHO's impact on the overall level of protection may be considered to be quite good, in spite of the fact that DG ECHO does not currently have a very significant number of protection projects in its portfolio. The major contributing factor in this regard is the improvement of access to cut-off and isolated areas made possible through the penetration of DG ECHO flights, the construction/rehabilitation of landing sites or roads, the encouragement of partners to initiate projects in these difficult areas and the willingness to fund such actions in spite of their much higher comparative cost. Although this could not be examined in detail, there is major potential for a snowball effect, as the initial partners' presence is likely to attract additional players in the same area and, as largely documented, in some contexts increased presence entails decreases dangers for the civilian population.
189. Extended funding of the protection cluster co-lead is also likely to have an impact on protection that cannot be ignored. The establishment of the protection cluster has somewhat made a home for humanitarian protection that did not exist before, contrary to other clusters that were preceded by sector coordination groups. Therefore, there is strong potential for improvement in the performance of this cluster. The joint advocacy, performed by the cluster, also has the potential for further development and increased effectiveness and efficiency if the administrative burden of the cluster can be streamlined, which is precisely one of the goals of the strengthening of the leadership of the cluster. The "laundering" or "neutralisation" of the sources of information through the cluster also has the potential to encourage humanitarian players to provide more information resulting from their monitoring in the long run, as this is less likely to compromise their field presence or security.
190. Unfortunately, clear negative impacts can also be assessed. For instance, the massive violations against the civilian population perpetrated by FARDC with the indirect support of MONUC when carrying out joint operations raise the issue of the dual or ambiguous character of the Peace-enforcement Force's mandate (peace-keeping vs. protection of civilians). More widely and efficiently practicing the "do no harm" principle aims precisely at preventing the negative impact of humanitarian action on populations, such as the protection risks linked to the distribution of assistance. Other risks of negative impact are similar in DRC to other contexts, such as the reinforcement of illegal and/or predatory authorities by the provision of assistance or the potential use of rehabilitated infrastructure by armed groups.
191. One of the salient possible negative impacts of the aid effort is related to SGBV. New trends of false allegations for compensation are appearing as a result of the excessive attention paid to the SGBV issue compared to other problems. In addition, the creation of a vertical approach in the case

management of rape survivors, including health care, psychological support and income generation activities, can be detrimental to the adequate management of the complex array of issues that fuels SGBV. The current approach risks diverting attention from the urgent need of developing policies and capacities in public health and enhance reproductive health services. Perhaps the worst impact is having diverted attention from a more comprehensive approach to protection against violence in DRC. Last but not least, the absence of, or the very weak monitoring by humanitarian players of, potential violent reprisals by rape perpetrators against victims who have dared to lodge a complaint against them (and who in many cases have been convinced to do so) seems to demonstrate a very worrying lack of accountability by these players.

VI.2. Impact of Gender Review

192. A Review of Gender Issues including Strategies against Gender-based Violence in Humanitarian Interventions was produced for DG ECHO (2008-2009).¹⁶ This evaluation sought to determine if there had been any follow-up to this review.
193. The review provides an important and solid strategy document for better introducing a gender dimension into DG ECHO's humanitarian aid. DG ECHO has assumed the review at HQ level and a policy process for developing a policy document on the gender dimension of EU humanitarian aid is under way. This document will contribute to strengthen DG ECHO's gender approach and to make the recommendations of the gender review operational. . The findings and recommendations of the review have been shared with Member States (at the COHAFA level), with partners (at HQ level) and with DG ECHO desk officers and experts (in an expert's seminar and in two regional workshops). At the field level and in the DRC context, the information has yet to trickle down. There has been limited take up on the part of partners. Gender is currently not introduced as part of the strategic dialogue DG ECHO has in the field with its partners. TAs acknowledge that many partners pay lip service to gender issues copying and pasting the same information under the cross-cutting issues section of the Single Form.
194. The evaluation found that introducing gender into programming was not common in practice and there was much leverage afforded on these issues. Limitations affecting the introduction of a gender dimension are similar to those affecting protection. Gender sensitivity and leadership on protection issues within the organisation are necessary both at higher levels and in the field. Gender and protection dimensions require specific tools to be adopted, including their expression in administrative and monitoring documents. Another limitation is that the Single Form relegates gender to a paragraph at the end of the form as a cross-cutting issue when a gender dimension, and like protection, has to consider dynamics and be part of a more sensitive needs assessment, intervention logic and monitoring process.
195. In the projects visited, and based on interviews, the evaluation also found that women were not sufficiently consulted on projects and that their participation to committees was limited. SGBV and women's issues (although less so) in DRC have been high on the international advocacy agenda. In practice, however, the impact in terms of changing patterns or improving conditions for women has been extremely limited. The latter is due to the lack of capacity of certain organisations involved and ineffective coordination.

VI.3. Main Conclusions / Strategic and operational recommendations

¹⁶ *Review of Gender issues including strategies against Gender-Based Violence in Humanitarian Interventions*; 2009.

VI. Impact	
Main conclusions	Strategic and operational recommendations
1. DG ECHO's impact on the overall level of protection of civilians may be considered quite good: Improvement of access to cut-off and isolated areas made possible through the penetration of DG ECHO flights, the construction/rehabilitation of landing sites or roads, the encouragement of partners to initiate projects in these difficult areas and the support to coordination of protection.	1. DG ECHO is encouraged to pursue the achieved impact consolidating achievements and assuring perennity through coordination with development partners. The planned funding of the cluster co lead can have positive impact in the overall protection effort, and DG ECHO is encouraged to confirm this support.
Evaluation of the implementation of conclusions of the gender review	
2. The review provides an important and solid strategy document for better introducing a gender dimension into DG ECHO's humanitarian aid.	2. Operationalise the recommendations of the gender review, in particular to improve gender aspects of SGBV approaches.
3. Gender is currently not introduced as part of the strategic dialogue DG ECHO has in the field with its partners.	3. Incentives should be established within DG ECHO to mainstream gender effectively, with an initial focus on specific priority contexts such as DRC.
4. In the projects visited, and based on interviews, the evaluation also found that women were not sufficiently consulted on projects and that their participation to committees was limited. Furthermore, the impact in terms of changing patterns or improving conditions for women has been extremely limited.	4. DG ECHO should incorporate a gender-balanced approach for staffing in eastern DRC. DG ECHO should also emphasise the fact that integrating gender does not require special expertise. These aspects should be addressed by relevant training and interventions of an RSO gender specialist, who should also further aid the development of guidelines, indicators and tools in order to continue improving the effectiveness of SGBV interventions.
5. Limitations affecting the introduction of a gender dimension are similar to those affecting protection.	5. DG ECHO should explore the feasibility of introducing expertise in gender at the RSO level. DG ECHO is also encouraged to streamline gender and determine priorities in order to prevent an overburden of the process.
6. Gender and protection dimensions require specific tools to be adopted, including their expression in administrative and monitoring documents.	6. Develop specific tools to support the gender and protection dimension of interventions in GBV (in line with recommendation 18 of the Gender review), including guidance points in the Single Form (recommendation 19 of Gender Review)

VII. Cross-cutting issues

VII.1. Gender

196. The evaluation team was asked to focus on the follow-up to the review on gender issues which has covered the 2008-2009 period. An assessment and recommendations are mentioned under VI.2 and VI.3 above.
197. Gender is a salient cross-cutting issue in DRC, given the structural devaluation of women and the discriminatory role of women, girls and children in many communities. Special attention should be paid to assure a gender balance and sensitivity when dealing with any vulnerability or assistance issue.

It should be noted that the evaluation team interviewed 100 individuals during the field visit, of whom 62 were male and 38 were female. The evaluation used a gender-sensitive framework to assess gender balance on all levels of the scope of the evaluations, including gender balance in management and decision making levels, in community based associations, role of gender in beneficiaries' participation mechanisms, etc.

198. Gender sensitivity has to be improved at all levels of the humanitarian response in DRC. The lack of participation or leadership of women in many aspects related with the management of programmes of SGBV and even basic WASH interventions has to be readdressed. The absence of concern for male victims of SGBV also requires addressing.
199. As with protection, the staff perception that integrating gender requires special expertise needs to be addressed by relevant and applied training with the support of an RSO gender specialist that would further help with the development of guidelines, indicators and tools and focus on improving the effectiveness of SGBV programmes. The possibility that this expertise could be shared with a protection specialist should not be ruled out.

VII.2. HIV/AIDS

200. As in many other areas of public health, the lack of data and poor reporting impair a rational approach to the issues related with HIV/AIDS in DRC. Current estimates, though, allow for the inference that HIV/AIDS prevalence is lower in DRC than in neighbouring countries. The lack of institutional capacity, lack of access to health care and treatment, the limited diagnostic availability, are joint factors affecting the reliability of estimates, but the long-standing presence of international organisations and field presence of many aid workers allow for the assumption that estimates are not far from reality.
201. The acute and protracted conflict that affects many areas of the country, in addition to transnational and internal displacement of populations are factors that increase risks associated with the transmission of diseases, yet makes it difficult to access health care, diagnosis and treatment.
202. Prevalence estimation varies greatly according to the source. WHO 2008 estimates a prevalence ranging from 1.2-1.7 percent in adults¹⁷. Other sources would estimate up to 4.2 percent¹⁸. Interestingly, among specific population groups, the prevalence is higher. It is accepted that among soldiers, prevalence ranges around 6 percent, truck drivers 4 percent, and sex workers 12 percent, among specific groups taken into account.
203. Geographically, no data supports that areas of conflict in DRC are experiencing a recrudescence or an increase in figures of HIV transmission. Eastern DRC has the same or lower estimates than other areas of the country and even lower than sentinel sites in Rwanda and Burundi¹⁹. Estimates in Orientale, though, warn of a higher prevalence than in the Kivus, around 6 percent. Goma, as well, has been estimated to have a 5% prevalence of HIV (Bukavu figures are estimated around 3%).
204. It must be taken into account that even with a supposed low prevalence, circumstances of war and displacement make HIV/AIDS a relevant issue. The number of people with access to treatment is still moderate, around 20 percent of estimated needs²⁰, but all effort should focus on assuring access to treatment for those displaced by violence and to returnees. Refugees are likely to have received

¹⁷ <http://apps.who.int/globalatlas/predefinedReports/>, visited July 11 2010-07-11

¹⁸ <http://www.kff.org/hiv/aids/>, HIV AIDS fact sheet

¹⁹ <http://apps.who.int/globalatlas/predefinedReports/>, visited July 11 2010-07-11

²⁰ The Global Fund : <http://portfolio.theglobalfund.org>

diagnostic support and care if needed, and this is critical to be taken into account in return processes like those occurring in eastern DRC. Returnees pose additional concerns when refugees come from areas of high prevalence of HIV.

205. HIV transmission is an important risk related with SGBV. The fact that in many cases the perpetrators are military forces, and that gang rape and brutal practices are frequent, undoubtedly increase the risk of HIV transmission. Evidence, however, does not seem to support a significant prevalence of HIV in SGBV survivors. Panzi Hospital reports 4.5 percent of positive testing among patients treated, which is close to the estimated prevalence for pregnant women as a whole. HIV transmission, however, is a legitimate concern of rape victims and should be addressed systematically.
206. DRC has benefitted from a number of grants from the Global Fund Tuberculosis, Aids and Malaria (GFTAM). More than US\$ 555 million have been approved-- 40 percent of those allocated to AIDS. Of the total US\$ 318 million disbursed so far, around US\$ 160 million corresponded to AIDS projects. The main partner for implementation is UNDP²¹.
207. The evaluation has found that issues related to awareness and diagnostic access have been taken into account in all ECHO funded projects. HIV measures are taken systematically in both referral centres in Goma and Bukavu, and sensitisation and education is provided in the health sector projects. However, much more should be done in order to facilitate access to diagnosis and especially ART treatment to those in need--a problem beyond the humanitarian reach. Finally, coordination and integration between GFTAM projects and humanitarian actions in the sector seem to need improvement.

VII.3. Security of humanitarian personnel

208. The evaluation has confirmed how closely personnel security may be linked to protection issues. This issue was discussed mainly within the framework of the players' role in monitoring/reporting of violations and advocacy in cut-off/isolated areas where the players were almost the only ones present. Some partners pointed out that, for security reasons, they preferred to restrict themselves to monitoring and reporting of violations but did not feel comfortable carrying out direct advocacy activities with armed groups or FARDC unless their extended presence in the area allowed them to build relations of trust with both the armed groups' leaders and the populations.
209. DG ECHO should further reflect on the connection between protection projects and security issues. The FGHP do not include this dimension at the moment. It appears likely that one of the competitive advantages of protection-mandated agencies like the ICRC in the protection field is their capacity to deal professionally and systematically with the security of their personnel. Notably, their policy allows for a sufficient degree of flexibility to quickly adapt their security policy (from restriction to permission for instance) to be able to respond to unexpected windows of opportunity for access. The more DG ECHO partners are willing to move into protection, the more they will have to be able to control security issues, as some agencies like Oxfam seem to have already become aware. Conversely, it should also be acknowledged that the UN agencies are quite limited in their movements due to restrictive UN DSS regulations and that this may represent some form of disadvantage compared to other partners.

²¹ THE Global Fund : <http://portfolio.theglobalfund.org>

Special Section. Overview of Sexual and other Gender-Based Violence (SGBV)²² in DRC

1. The response to Sexual and other forms of Gender-Based Violence (SGBV) has become a salient issue within the international response to the stagnant crisis in DRC. Numerous reports support the relevance of GBV in the conflict context in the East, while sexual and GBV in DRC has gained attention in western public opinion thanks to media attention.
2. The conflict in eastern DRC has dragged on for more than a decade. High mortality has been reported²³ and overall violations of human rights are widespread among civilians, including arbitrary detention, forced recruitment, child abuse/slavery and forced labour; looting and pillaging; as well as sexual and GBV. Consequently, protection has become the main need in this crisis and one of the main objectives of the humanitarian response²⁴. “The violence in DRC embodies a new kind of war emerging in the 21st century – one that occurs in villages more than battlefields and affects more civilians than armed combatants”²⁵. It should not be forgotten that SGBV is only one of the protection violations of the civilian population in DRC. The protection cluster reports that rape accounts for approximately 10 percent of violations, in addition to looting, arson, extortions, arbitrary detention and execution.
3. The nature of the SGBV problem is complex and has evolved since it was first brought into the spotlight in relation to the use of rape as a tool of war. SGBV cannot be understood, however, without adequately considering the relevance of other violations and the degradation of social and cultural mechanisms and their consequences on gender aspects. The apparent migration of these war atrocities into civilian relationships between men and women raises the stakes of understanding this war-time, transformed into peace-time, rape.
4. To begin with, the issue is not unique to eastern DRC. In conflict situations defined as “complex emergencies”, 90 percent of casualties are within the civilian population, and SGBV is increasingly reported in those settings²⁶. The lack of respect of International Humanitarian Law (IHL) and the use of the civilian population to support or punish armed groups sets the scene for the use of rape as a weapon of war. However, rape in DRC is more than a weapon of war. As a recent study puts it, “a reductionist conceptualisation of rape as a weapon of war in the DRC has entailed many problems, as it overshadows other forms of violence and hides other factors that contribute to conflict and post-conflict sexual violence”²⁷.
5. The spike in displacement and the recrudescence of guerrilla type warfare in eastern DRC in 2009 occurred in an already deteriorated context: where the rule of law and presence of state institutions had

²² The term "sexual and other forms of gender-based violence" comprises not only rape and attempted rape, but also sexual abuse, sexual exploitation, forced early marriage, domestic violence, marital rape, trafficking and female genital mutilation.

²³ International Rescue Committee (IRC); *Mortality in the Democratic Republic of Congo: an ongoing crisis*; 2007

²⁴ Protection as formulated as the first strategic objective in HAP 2010

²⁵ Harvard Humanitarian Initiative; *Characterizing Sexual Violence in the Democratic Republic of the Congo. Profiles of Violence, Community Responses, and Implications for the Protection of Women*; 2009

²⁶ Jewkes R, Sen P, Garcia Moreno C. (2002) *Sexual Violence*. In Krug EG et al (Eds) *World Health Report on Violence and Health*. World Health Organization, Geneva; 2002

²⁷ Maria Eriksson Baaz and Maria Stern; *The Complexity of Violence: A critical analysis of sexual violence in the Democratic Republic of Congo (DRC)*. Sida Working Paper on Gender Based Violence; 2010

long collapsed from years of instability; where the presence of natural resources fuels illegal trade and finances armed factions; where trans-border conflict supports armed groups; and where land rights issues following years of population movement set the basis for additional conflict. This deteriorating environment sets the stage for SGBV to acquire a dimension that is more complex than the typical weapon used to terrorise and humiliate communities for war purposes. The lack of institutions (police and judiciary), the degradation of the role of women, the lack of customary or traditional conflict resolution mechanisms, and the cultural submission of women and children unite to make rape a common practice. To this contributed the high proportion of rape committed by armed personnel from the army of DRC (FARDC) and police (POC), supposedly the protective forces, as well as the increased frequency of rape by civilians. These factors also facilitate other types of gender violence that go beyond war tactics and are all on the rise including forced marriage, prostitution, trafficking and domestic violence. Forced child labour, child recruitment and violence against children and youth are also frequent. Lack of economic opportunities and pervasive and brutal violence have contributed to the weakening of family and community structures. The war has created an environment in which violence and rape have been increasingly considered normal.

6. It is important to gain a better understanding of the incidence of baseline domestic violence and peace-time stranger rape that existed prior to the outbreak of armed conflict. Both are forms of violence that may have been prevalent prior to the war. Both may very well contribute to the sustaining of very high levels of sexual violence in the post-conflict period, given the very hierarchical structure of domestic gender relations emerging from different studies and also evidenced during the evaluation. The division of labour in communities visited was often abusive to women and children.

Data, characterisation and trends

7. In spite of the widespread claim to have reliable data to better define effective action, data is actually scarce and poor. Regardless of the magnitude of the sexual violence epidemic in eastern DRC, and notwithstanding the number of organisations devoting resources to sexual violence programs, rigorous data on sexual and gender-based violence in DRC is lacking. Baseline data is unclear, and the data that is available combines prevalence and incidence data. Sampling is limited and the existing reporting procedures are poor. Informal reports of atrocities often form the basis in defining the response.
8. Data is incomplete and does not reflect the dimension of the problem and its geographical extension. The UN Security Council Resolution 1820 already request action to improve data on this issue.²⁸ The lack of coordination among service providers remains a problem even after years of presence and continued funding. Confidentiality is raised as a limitation in the data management of cases. This seems to be a general problem affecting all cases of SGBV in conflict settings. As DG ECHO's gender review puts it, despite all the different agencies' mandates and donor requirements "progress could be made in expanding the number of core common data points if more technical support were available at local level."²⁹
9. Various studies analyzed some datasets, yet much work remains in providing a reliable description of the nuances of SGBV in DRC. These studies and analyses have used available referral center datasets, and the data collecting mechanisms of some actors.³⁰ In all cases, however, a bias in the sampling due to the

²⁸ <http://www.state.gov/documents/organization/106577.pdf>

²⁹ *Review of Gender issues including strategies against Gender-Based Violence in Humanitarian Interventions*; 2009; commissioned by DG ECHO; paragraph 64, pp.30.

³⁰ Some of the studies reviewed are: (1) Harvard Humanitarian Initiative: 2009 (2) Harvard Humanitarian Initiative With Support from Oxfam America; "Now, the world is without me": *An investigation of sexual violence in Eastern Democratic Republic of Congo*; 2010 (3) Steiner et al.: 2009 (4) UNFPA; *Rapport des cas incidents de violences sexuelles en RDC. Statistiques des cas incidents de violences sexuelles reportées en 2007*.

internal limitations of the information systems and the population covered by each instrument prevents systematic conclusions from being reached.

10. According Panzi Hospital records in South Kivu, a total of 9,020 patients received post-sexual violence care between 2004 and 2008. Only 4,300 of which were able to be analyzed due to limitations in the data collected³¹. Malteser recorded 20,517 cases from the 23 specialized clinics they support in South Kivu between 2005 and 2007; a three year period.³² Heal Africa provided medical treatment to 14,100 survivors during the 2003-2009 period in North Kivu; 2,672 in 2007. UNFPA acknowledges 740 cases in South Kivu for 2007, and admits that other partners have recorded up to 4,218 cases.³³ Malteser alone has published the figure of 5,070 rape survivors in 2007 within the five health zones where they carry out their activities. UNFPA data refers to incident cases in 2007, while Panzi (Bukavu) and Heal Africa (Goma) data actually includes old cases that show up long after the actual attack. Malteser reports, however, that the majority of those treated under their SGBV program were survivors of less than a year from the aggression. With a national total of 13,200 cases in 2007, UNFPA data seems far from accurate and is contested by many in the field.
11. A related problem is that national associations (key to the referral system as they are the main bodies providing psychosocial assistance) have realised that higher numbers of victims mean increased chances of obtaining international financial support. There is evidence that some associations have exaggerated their statistics, have traded women between their centres to augment statistics and have encouraged repeat visits by women in order to count them more than once.³⁴ This new development of rape commercialisation has been elaborated in a recent report,³⁵ and should be taken into account. Victims, as well as communities as a whole, may well use the resources and attention to SGBV entangled with survival strategies in contexts where resources are scarce. False allegations of rape in order to get access to services or compensation are already taking place.
12. In short, the available data is inconclusive and could be misleading. We can, however, take the different exercises as samples, which, while not representative, can provide some useful information. Trends over time suggest that the total number of women requesting post-rape care at Panzi Hospital declined between 2004 and 2008. This trend was also reported by Malteser that also argues that the decline in programme attendance is likely due to abating numbers of "old" cases of sexual violence over the course of many months rather than a lower frequency of sexual violence. It seems that there is a shift in favor of early case reporting.³⁶
13. The decreasing number of reported sexual assaults between 2004 and 2008 may parallel a general decrease in the levels of military violence within the region during that time frame. However, given that there are significant delays between sexual assault and time of treatment, no conclusion can be drawn. An attempt was made to further investigate the relationship between South Kivu's rape epidemic and the region's militarization.³⁷ The study shows that several of the spikes in sexual assault numbers could be explained by a military strike or an intensification of military activity. For instance, the significant increase in sexual attacks recorded in Bukavu in June 2004 coincides with the infamous incursion of Laurent Nkunda, while the peak in April 2004 seems to correlate with clashes between Congolese and Rwandan troops near Bukavu. There is also more recent evidence that the number of sexual assaults has

³¹ (1) Harvard Humanitarian Initiative: 2009 (2) Harvard Humanitarian Initiative: 2010.

³² Steiner et al. 2009.

³³ UNFPA: 2007.

³⁴ Claudia Rodriguez; *Sexual violence in South Kivu, Congo, from "Forced Migration Review" No.27 Sexual violence: weapon of war, impediment to peace; 2007*

³⁵ Maria Eriksson Baaz and Maria Stern: 2010

³⁶ Steiner et al.: 2009.

³⁷ Ibid.

increased once again in 2009 since the beginning of the joint Rwandan-Congolese military offensive against the DRC-based Democratic Front for the Liberation of Rwanda (FDLR).

14. For many people interviewed in different surveys, rape in DRC is associated with the influx of foreign armed actors into the region as the starting point of rape as an epidemic in eastern DRC. Most people met would agree in their assertion that sexual violence began as a result of the conflict, and the associated proliferation of armed groups in the region. However, there is currently consensus among the different stakeholders on the evolution of rape from what was characterized as a problem caused by “foreigners” to one that is now commonplace in civilian society. Today, in addition, most people would agree that the main source of sexual violence comes from FARDC members, soldiers and ranking officers, in many areas, and even from police officers. The fact that they are unpaid, have poor relationships with civilian population, have lost their self esteem, and are poorly disciplined contributes to this trend. Sexual attacks committed by FARDC are reportedly not as brutal or terrorizing as those committed by armed groups in the context of fighting for the control of territory, but no data clearly support this assumption.
15. Available data provide strong evidence that the number of reported civilian rapes is on the rise in South Kivu. One of these studies,³⁸ comparing types of perpetrators in 2004 to those in 2008 revealed impressive differences. There was a remarkable increase (17-fold) in the reported number of civilian perpetrators between 2004 and 2008. During the same time period, the number of reported rapes by armed combatants decreased by 77 percent. Despite the increase in civilian perpetrators over the four year period, armed combatants were still the predominant perpetrators in 2008 (52 percent in 2004 vs. 46 percent in 2008). Of all rapes reported for 2004, less than one percent was perpetrated by civilians, while this represented 38 percent of all rapes reported in 2008. Data for 2007 from the “Comite Territorial contre les Violences Sexuelles” (CTVS) of Beni actually reinforce this profiling of civilian rape. Out of 695 cases identified, 63 percent of perpetrators were civilian, and 64 percent were acquainted to the victim³⁹. While half of the victims were minors, only 3 percent of rapes took place at victim’s residences (rape by military does not have this age pre-eminence for minors and occurs mainly during attacks to the victims’ houses). Civilian rape seems more frequent in urban and relatively secure environments.
16. Further evidence beyond this dataset suggests increasing reports of male rape over the last several months.⁴⁰ The targeting of men for sexual violence coincides with the joint FARDC – Rwandese army military offensive to disarm the FDLR. Ten percent of the reported rape cases in Goma, North Kivu in June 2009 involved male victims and these reportedly occurred across a large geographical region.
17. The general opinion is that there is still an important relationship between armed activity and the incidence of rape, and the studies and reports mentioned above support this. There is also consensus on the increased number of cases in 2009. However, the 17-fold increase in reported cases of civilian rape, and statistically significant declines in the types of rape known to be perpetrated almost exclusively by armed combatants (gang rape and sexual slavery), indicate that there seems to be a shift emerging in the nature of sexual violence. Those changes pose particular challenges to MONUC on how to adapt protective measures to the characteristics of violations in each particular area.
18. The civilian adoption of sexual violence is quite disturbing since it may well have long-term implications that will not be easily reversed. This rise in civilian rape speaks to the reversal of the society’s norms and values and to the ongoing environment of impunity that exists in eastern DRC.

³⁸ Harvard Humanitarian Initiative: 2010.

³⁹ Data published in Heal Africa ; *Violences sexuelles dans les provinces du Nord et Sud Kivu* ; Situation, approches Interventions, Goma; 2009

⁴⁰ Gettleman J. Symbol of unhealed Congo: male rape victims. New York Times 2009 [cited 2009 August 5]; Available from: http://www.nytimes.com/2009/08/05/world/africa/05congo.html?_r=2&hp

Further study is needed to determine the impact of the military rape epidemic on the valuation of women within Congolese culture.

19. To constrain the recent trend of civilian perpetrated sexual violence, the environment of impunity will have to be addressed and the status of women, as well as women's rights, will have to be advanced. Furthermore, the mentality of entire communities will likely have to be reset to recognise that rape is an unacceptable and punishable crime and to accept women as equal members of society. In addition, the opportunistic behaviour in terms of rape commercialisation practices (claiming to be a rape victim to get compensations or access to health care) has to be identified and limited. Aid organizations will have to collaborate with local communities to identify new patterns in the areas of intervention and appears as necessary to promote non-military means of addressing security threats.

Coverage, stigma, access to victims and provision of services

20. The massive attention to SGBV issues has probably facilitated the extension of services to some areas of the country. The coverage is still very incomplete, however. In a UNFPA exercise mapping different actors present in the field and the services available, data was obtained from only 55 percent of the health zones in North Kivu, South Kivu, Province Orientale, Maniema and Equateur Province. The data obtained already revealed significant gaps in the availability of services.
21. When comparing the data from different parts of the country, a number of locations in North Kivu and South Kivu seem to provide the greatest number of reported SGBV cases. This could be a consequence of better awareness and presence of actors, but is also likely related to the insecurity context. However, the high reported numbers of SGBV in Kinshasa and in the localities of Tembo and Kasongo Lunda in Bandundu remains unexplained.⁴¹
22. Regarding Orientale, the evaluation team found that the pattern of violence is specific to the situation created by the displacement of population fleeing the presence of Lord Resistance Army (LRA) combatants. Although LRA members commit horrendous crimes such as mutilation and rape, they are more feared for their looting and kidnapping of children. Rape in Orientale seems largely tied to FARDC and police elements, as well as does the increase in civilian perpetrators as a consequence of the degradation of intercommunity bonds.
23. Despite the fact that rape is extremely widespread and related services have been given some priority, survivors still face significant challenges in seeking and obtaining care. It is accepted that the response to SGBV victims has to include medical care and psychosocial support (including PTSD care), and mediation and reinsertion of the victim into the family and community. Livelihood programmes are also considered essential for the reinsertion of victims.
24. While medical programmes seem to be the most straightforward, the level of disrepair of the DRC health system makes this service uneven and erratic. The quality of services, presence of staff and availability of drugs depends largely on the external support of NGOs. Sustainability strategies are difficult to apply, and in some cases, result in impairing access to the most vulnerable when fees are introduced.
25. In a study carried out between 2007 and 2008,⁴² including a survey among rape survivors, almost half of the women polled (45.5 percent) waited a year or more before seeking medical services. Fifty-five percent of the women stated that it took them over a day to travel to health care centres with SGBV services and only 4.2 percent of the women reported receiving medical SGBV services within 72 hours

⁴¹ Zones prioritaires, HAP 2010

⁴² Harvard Humanitarian Initiative: 2009

of the attack – a medically important window of time in which victims can be given prophylaxis for STIs and HIV. The Malteser report⁴³ shows that while, in 2005, 3.2 percent of rape survivors received care within 72 hours, the percentage dropped to 0.6 percent in 2007. Women seem unable to access services in time. Prevalent insecurity, lack of awareness and stigmatisation concerns are cited as reasons for seeking treatment so late. In the area visited by the evaluation in South Kivu, access to health facilities was delayed by poor road conditions. Additionally, the policy in the health zone in South Kivu was to provide PEP⁴⁴ kits in the referral hospital, making it almost impossible for a victim to reach this type of care in time. The survey mentioned above asked victims for the reason they waited to seek services: 41.4 percent of respondents said they did not have enough money for either the transportation or the services themselves. Roughly one third said they did not know SGBV services existed and 13.3 percent said they did not want others to know they were seeking assistance for sexual violence. Two thirds of respondents said the reason they sought services was for medical problems associated with rape. Very few sought services for psychological support or for a medical problem not associated with rape.

26. This is a critical aspect of how the programs address SGBV. It is likely that women who live in remote villages are less often seeking post-sexual violence services. The expansion of integrated reproductive health services to rural areas seems an advisable strategy to facilitate access to eventual victims and raise community awareness on SGBV aspects. The aim of the overall effort should be to provide women with reliable services to support them and provide alternatives in the situation with which they are confronted, including when they make decisions that would create resistance among the community (forced marriages or sexual utilisation of women by extended family members, for example).
27. The inadequate local capacity and the weakness of the health system have favoured a general trend in supporting specific services for SGBV survivors. Specialised hospitals, outreach services, and ad hoc programmes have been developed, and the effects to create some sort of positive discrimination are becoming evident. The surgical services that victims of sexual violence require are common to what many women in DRC need as a consequence of poor maternity services and prolonged labour and dystocic deliveries. The fact that these services are labelled for victims of SGBV and that referral is facilitated to these cases is creating the phenomenon of false victims who claim the right to be treated in these facilities.
28. Stigmatisation issues are crucial in the context of SGBV survivors, and the evaluation has reviewed and discussed some points in this regard with DG ECHO partners in order to define more adequate approaches to community-based support. Many people in the community receive all news and information from word of mouth; it is mainly through gossip that a community comes to know who, when, and where women have been raped. Even though many women identified women's groups as one of the best ways to cope with the shame felt after being raped, they were quick to point out that this created problems as well, as a major consequence of the tradition of gossiping was the quick spread of information after telling just a few friends.
29. It also has to be taken into account that husbands of women who have been raped experience stigma as well. Men are required to follow customs and often experience fear of disease and feelings of shame and embarrassment after witnessing and failing to protect their wives from rape, and tend to believe that they had to reject their wives. The role of local custom is very important in creating an environment conducive to the stigmatisation and rejection of rape victims. Women perceived that the root of the stigma problem is framed in local customs, such as levirate marriages, the concept of women as property, and the idea that women who have been raped bring misfortune into the family. In the recently

⁴³ Steiner et al.: 2009

⁴⁴ Post Exposure Prophylaxis (PEP) kit includes anticonceptive and antiretroviral medication as well as prevention for sexually transmitted diseases.

published SIDA working paper⁴⁵ surveys disclose that when asked about determinant factors in the repudiation of rape survivors, men noted religion, education, customs, and economic status as factors that affected how a survivor might be treated. An interesting element is that the difference between adultery and rape is blurred regarding the consequences of both actions for interfamily relations. In both cases, the woman will be punished or repudiated and will not be allowed to take care of her husband and children.

30. A World Health Organization (WHO) study also identified poverty, traditional gender norms that support male superiority and entitlement, social norms that tolerate or justify violence against women, weak community sanctions against perpetrators, and widespread crime and societal violence as common characteristics of places with pervasive SGBV.⁴⁶ An additional aspect to take into account is the management of traumatised witnesses. The consequences of possible violent behaviour and perpetuation of rape practices in the community by those secondary victims (witnesses or forced perpetrators) should be addressed through specific programmes. A number of studies conducted in peace-time environments suggest that experiencing sexual violence, especially as a child, has negative consequences throughout an individual's lifecycle⁴⁷.

Judiciary claims and impunity

31. There is a general perception that impunity and a lack of an adequate application of the rule of law is facilitating the extension of the SGBV⁴⁸. The Congolese law of 2006, which consolidates the rights of women, could provide a framework for action, but even at the field level, the implementation of this law is problematic at this stage due to disparities with customary laws. A great deal of awareness and dissemination will be required. The ineptitude of the Congolese government and the flawed and corrupt judiciary system mean that men and women often settle their disputes at the community level. The study mentioned disclosed a clear hierarchy of men over women within communities, with an established path for seeking assistance and solutions to community problems, beginning at the family level and working up towards the chief of the neighbourhood. For the most part, men are the decision-makers and the process of seeking justice was portrayed as one that needed to be led by a man. Rape survivors were sceptical about the effectiveness of male-led justice.
32. There is a sense of pervasive impunity regarding these types of violations. The fact that the most frequent perpetrators in many cases are GoC police or armed forces creates a sense of impunity that is difficult to overcome. The reasons for a victim to place a claim are not simply based on principle, but in the hopes of obtaining compensation and contributing to risk avoidance for other victims. Some local NGOs help victims to place claims and follow their cases, but extreme difficulties impair success. These difficulties include victim intimidation, repeat attacks and the fact that cases of military personnel being arrested are exceptional. In North Kivu, 26 support organizations facilitate judiciary trials for victims. They have channelled 1,082 cases, 382 of which had sentences in favour of the victims. Only two are being implemented. None of the trials has resulted in compensation for victims. In Goma and Bukavu, there were 31 convictions, with approximately ten perpetrators in prison.⁴⁹ The situation in Haut-Uélé (Dungu) is even more difficult. The lack of a judiciary or police presence in town (or in a town nearby)

⁴⁵ Maria Eriksson Baaz and Maria Stern: 2010.

⁴⁶ Jewkes R, Sen P, Garcia Moreno C.: 2002

⁴⁷ Ibid.

⁴⁸ *Justice, Impunity, and Sexual Violence in Eastern Democratic Republic of Congo*; Report of the International parliamentary-expert mission addressing impunity for sexual crimes in the Democratic Republic of Congo. Published November 2008. Organised by The Swedish Foundation for Human Rights in collaboration with The All Party Parliamentary Group (UK Parliament) on the Great Lakes Region of Africa.

⁴⁹ Heal Africa : 2009.

renders the prosecution of perpetrators impossible. The distance and the insecurity involved in reaching the territorial capital where the presence of the State exists is a deterrent to prosecution.

33. A new profile of plaintiffs has been already detected. Rape commercialisation is beginning to become common. In some cases, claims for compensation are based on false allegations of rape, and FARDC personnel complain that even judiciary staff in the army engages in these practices. Moreover, a new dimension of the problem could develop if the judiciary is geared towards SGBV cases rather than to reinforce overall human rights violations.

Coordination

34. SGBV has become a unique case in the coordination of the humanitarian response. After years of being considered a sub-cluster of protection and also being addressed through the health cluster, the relevance and transcendence of the issue has prompted it to be taken on by the programme for the STAREC within the strategies to be developed for stabilisation of the region. It is also integral part of the ISSSS and is also being addressed through a specific UN/MONUC integrated strategy, aimed at providing rapid response to the consequences of the phenomenon, which has been adopted by the Presidency of DRC. The Government of DRC has developed as well, through the Minister of Gender, Family and Children, a national Strategy against SGBV, poorly operationalised. As a consequence, a number of fora are currently functional and can receive input on SGBV and potentially play a role in the response to the problem. SGBV's related issues will be addressed at the protection cluster, as part of other violations, while operational and strategic aspects will be addressed within the provincial and territorial committees against sexual violence (CPLVS and CTLVS). Funding mechanisms have become confusing for implementing partners, as the cluster system in place has contradictory messages about how to keep funding SGBV interventions through the Pooled Humanitarian Fund or if agencies should address their request to the funding mechanisms of STAREC.
35. The STAREC is meant to develop a set of provincial working groups on the following aspects of SGBV:
- Data collection and analysis
 - Health care case management
 - Psychological care
 - Judicial case management
 - Reintegration and support to livelihoods
36. It can be argued that the East of the country is going through a process of transition, but evidence from the field indicates that for the time being, the transition is nothing new. Even if SGBV is made an integral part of the Stabilisation Strategy of eastern DRC, which can make sense when considering the level of institutional support required to curb violations by state forces and the need to address impunity through addressing the security and judiciary system, the perspective for progress in these fields seems weak, meaning that the problem is at risk of being poorly addressed. One feeling in the field is that the excessive relevance given to SGBV compared to other forms of violence, and even the use of the "rape oriented" angle as opposed to a broader gender sensitive approach, favours a vertical and specific approach in the case management of SGBV. For a number of reasons this should be avoided, and the integration and reinforcement of related system-wide capacities should be addressed. Vertical programs may be adequate at a given stage, but they favour an inefficient use of resources, facilitate opportunistic behaviour and are unsustainable. System reinforcement is the adequate option, and humanitarian aid should not create parallel or vertical systems. Alignment and coordination between humanitarian and development actors is crucial. Moreover, women need to have alternative options when confronted with their culturally expected gender roles.

37. The clusters apparently provide a more field-based forum in which operational and strategic issues could be better addressed. The proposed structure of provincial working groups within the institutional stabilisation programme will likely suffer for some time from the already proven institutional weakness in all areas of intended intervention. A transition period between the cluster coordination and the more institutionalised one should be envisaged.
38. In addition, coordinated response by the different actors has been quite weak at field level so far. No real coordination between the actors takes place, data is not shared, reporting of violations is incomplete, and coverage is less than optimal. The effectiveness of the whole effort is at stake: Many victims cannot access services, they do not get compensation, little is done for their reintegration and recovery, and the perpetrators remain unpunished. Additionally, the value of women seems to have decreased socially and the whole gender aspect of submission and denial of women's rights seems worsening.
39. Strong and decided political action is needed to end the situation and assistance needs to be provided in the meantime. A reinforced cluster system should be able to improve data management and situation analysis, including gaps and access to victims. Advocacy and pressure could be better placed coming from a number of well-respected organisations present in the field. Information has to reach the high ranks of policymakers and the military in DRC, but independent and neutral advocacy is likely to play a better role than structural and politically tainted institutional mechanisms.

DG ECHO's response

40. DG ECHO is primarily concerned with assistance to people in need--the victims of violence. Consequently, DG ECHO is funding a number of projects to alleviate suffering and provide support to victims of SGBV. But in this case, victims of SGBV are also victims of a deep discrimination, enhanced by the conflict which itself has probably changed in character, decreasing the value of women in civil society. The scope of activities funded by DG ECHO are of assistance, and covers what have been formulated as the main aspects to be addressed: case management (medical and psychological), and reintegration and support to livelihoods. The more difficult area for DG ECHO to address is the fight against impunity, which requires supporting judiciary reform and tackling the institutional aspects of the army and police. Furthermore specific protection aspects of SGBV are weakly addressed; more attention could be placed in the protection components of the current response.

**SGBV humanitarian response:
Main Challenges**

- Access to victims, coverage and gaps
- Adequate response to needs
 - Timeliness
 - Type of services
 - Options
- Prevention
- Protection

Access and coverage:

41. It seems evident that DG ECHO attempts to cover the area where SGBV seems more prevalent in relation to the conflict. Evolution over time indicates an increase in coverage and extension of services to wide areas. DG ECHO supports the main referral centre in South Kivu - and also funds assistance projects in both provinces, which in 2009 intended to cover 5,000 victims of SGBV in North Kivu, and

6,800 in South Kivu (figures reached adding the foreseen targets of the different partners). The geographical coverage is quite comprehensive in the area where the issue of SGBV seems more salient. Assistance activities are the basis of the funded operations. A new project is just starting in Haut-Uélé with a much more specific protection approach, through COOPI, which will integrate protection aspects of sensibilisation, promotion of the rule of law, case identification, psychological support and livelihood and reintegration support, in coordination with the health care to be provided by Medair and MsF in the area. COOPI intends to reach 1,000 cases in Haut-Uélé throughout 2010. Being an area where SGBV is very much related to the violations carried out by FARDC and police, and to the internal cultural specificities of gender-based discrimination, the project will have more structural challenges than those more directly related to the consequences of direct conflict.

42. Being the geographical coverage apparently quite comprehensive data available does not allow concluding if coverage is adequate. As previously mentioned, incomplete or unreliable data affects the planning of an adequate response. DG ECHO tries the best possible coverage with available partners, but more should be reported on actual incidence and prevalence and the ultimate relation of SGBV to the conflict in order to allow for a gap analysis, something not feasible at the moment.

Response to needs:

43. It is accepted in the DRC context that the adequate services offered for victims of SGBV encompasses case management from a health and psychological standpoint, and should include legal support and components for victim reintegration. A number of actors are addressing these aspects, and DG ECHO is funding a significant share of the response to needs in coordination with other donors and the UN system.
44. Timeliness of the response has become a challenge in SGBV case management. It is accepted that victims should access services no later than 72 hours after an episode of rape in order to benefit from the preventive effects of the PEP kit. This is seldom happening. A number of factors affect this outcome, from lack of awareness at the community level to an inadequate offer of services in terms of geographical and economic accessibility. This issue is important, and the evaluation notes that all partners include this indicator in their monitoring but it is systematically unattained. The evaluation recommends an analysis of the factors affecting this outcome by each partner and to address these factors instead of intending reaching a result that for various reasons remains elusive. In the eastern DRC context, it seems that the limited number of post-rape pregnancies and the low HIV prevalence allow for some room for manoeuvre in the use of this indicator. It is not intended to downplay the importance of reaching victims in time, but in line with some DG ECHO partners' experiences, a joint effort and a redefinition of community actions and their integration with more structural resources has to be addressed (this refers to how to integrate DG ECHO partners and other actors working at community level with those supporting health services provision).
45. Also relevant is the question of whether or not the services offered are adequate. Some surveys allow for the conclusion to be made that women seek medical attention if there are physical consequences of the violence episode. Psychological care is less requested or not seen as a priority, but what is critical for victims is the reintegration and livelihood support. This support should include some sort of analysis on options to support women in their plea to escape the circle of SGBV that affect them in DRC. This goes beyond the response to the violence created by the armed conflict and addresses the structural framework of SGBV in DRC. What becomes clear from different sources is that if a quality service is offered, clients would recognise it and use it. This is happening even when some sort of fee is introduced.
46. One salient issue to be taken into account is the possible creation of vertical programs addressing SGBV. Even if the situation could be defined as an epidemic (as it has been), the only rational way to handle the

problem is through the reinforcement of local capacities and the integration of care. The creation of a parallel system will produce further stigmatisation, sideline essential aspects of the factors leading to the problem, and in the medium and short term, will decapitalise the already weak system and create vicious distortions (positive incentives to become an eligible victim, staff tendency to enrol in programmes supported by the international community neglecting normal programmes already weakly staffed, erroneous focus on measures, incorrect perception of the community on the pre-eminence of SGBV with respect to other forms of gender discrimination, etc). Integration of care and reinforcement of local capacity are essential, again putting pressure on the LRRD paradigm in the early post-conflict scenario. In general terms the provision of services to the vulnerable and the reinforcement of the health system seem to make more sense than SGBV specific approaches (in Haut- Uélé MSF set up a surgical capacity and found that genitourinary and genito-rectal fistula in the population covered is basically due to conditions not related with rape).

Prevention:

47. Prevention is probably the most complex aspect, that includes the reinforcement of the rule of law as much as a gender-based approach and addressing structural factors of the role of women in DRC and its degradation during the last decade. As explained previously, certain gender issues play a large role in the prevention of an adequate response to violations: Male police and judiciary systems deal poorly with the issue, and the loss of value of women through the conflict further exacerbates the situation. More critical, from a humanitarian response perspective, is to provide assistance in the framework of enhancing other options for women in terms of independence and education so as to end the cycle of violence and discrimination.
48. One possible recommendation, which would require further exploration and coordination among institutional and humanitarian actors, lies in the support or creation of reproductive health programmes at the health zone level. Currently, the offer of services is atomised between family planning, maternal health, and postnatal care. Integrating family planning, control of STDs, and antenatal care into a single program would offer the possibility of reaching women in communities (even through outreach components) and would facilitate the identification and assistance of SGBV victims. It could also include education and awareness activities that could improve the preventive component. This is, of course, a policy decision beyond DG ECHO's mandate, and requires adequate partners with presence in the field and the ability to develop quality interventions. The bottom line is to offer quality and adequate services to address the needs of the "clients", a perspective sometimes forgotten in humanitarian aid and that is always the basis for a successful intervention. Some experiences in DRC allow for the conclusion to be drawn that when a quality service is offered that responds to a perceived need, frequentation is high. The evaluation found that in some cases the demand has to be properly established, that is, women require some awareness and training on what could be a good service for them. However, if progress is made in this sense partners have to assure that the services offered will be adequate.
49. The attention to mental health problems and the consequences of the conflict to the psychological well-being of the population is very limited. DG ECHO has addressed this problem through a single partner and has supported the only referral centre in South Kivu, as a response to a specific situation of violence. The evaluation found that even if the intervention showed very positive results in this particular case, there is a need to integrate better mental health aspects with a SGBV component geographically and programmatically. The psychological case management is limited and more could be done in this regard. DG ECHO and its partners should explore an integration of PTSD and other psychological consequences of violence and insecurity within the strategy to address SGBV in a comprehensive way, integrating not only direct victims but also witnesses and other members of the community. Lack of attention to the mental health consequences of the violence in DRC has been identified as an important gap in the overall response.

Protection:

50. The assistance to victims of SGBV has a strong protection component that is not very well established in the DG ECHO funding process. SGBV victims can be seen as victims of conflict, but are basically victims of a violation of recognised rights. Treating the victim, but not having a picture of the causes and the steps to limit the phenomenon, does not seem to address the problem.
51. DG ECHO funding approaches currently request that the following elements are included: raising awareness, promotion, education of community workers, coverage and case management of victims from the health care point of view; and support for reintegration and livelihood activities for vulnerable victims.
52. Most partners do not seem to include protection elements, indicators or monitoring formats in their proposals, even if in some cases they carry out such activities. Some progress could be made in DRC using initiatives like the Minimum Agency Standards (MAS) for protection in assistance programs⁵⁰ or other available tools (like the IASC handbook of protection of IDPs) in order to better frame protection within DG ECHO operations in a harmonised way. Particularly within the health sector, the MAS recommends some key indicators to be taken into account in case of health interventions for victims of violence (see box below).

Minimum agency standards for incorporating protection in humanitarian response: Key Indicators for health interventions in cases of victims of violence
Appropriate mechanisms for the monitoring and reporting of instances of abuse and exploitation of civilians are established.
There are steps in place to protect medical records at all times, including during emergencies, from falling into the hands of potential/existing perpetrators.
There is a code of conduct in place for employed medical staff.
Fundamental rights of the disaster-affected population are a core component of staff training on codes of conduct.
Trained staffs are able to refer patients to, or directly provide, appropriate health care services and gender-sensitive counselling for people who have experienced rape, domestic violence, sexual exploitation, forced marriage, forced prostitution, female genital mutilation, trafficking and abduction.
Staff that has knowledge and skills relevant to working with children are available at the health facility or can be contacted immediately.
Agencies take steps to ensure that the treatment of individuals that are victims of physical and/or sexual violence, torture or other human rights abuses are dealt with as quickly as possible.
Agency staff knows how to refer individuals to psychosocial and legal support if available for victims/survivors, witnesses, and people who wish to report violations or seek legal redress.

53. Some partners, however, seem to avoid mentioning most of the above protection issues in DG ECHO correspondence, and in addition the evaluation found significant gaps in what teams in the field understand or put in practice regarding the following aspects:

⁵⁰ Inter-agency group (Caritas Australia, CARE Australia, Oxfam Australia and World Vision Australia); *Minimum Agency Standards for Incorporating Protection into Humanitarian Response. Field testing version; 2008*

- Medical forensic certification procedures: how are they addressed, who is in charge, confidentiality issues, follow up, etc.
- Reporting of violations: to whom, etc. An interface with a protection actor to channel the information towards responsible instances is lacking.
- Stigmatisation and exposure of victims to further damage: No mention of means and ways to address this.
- Comprehensive approach: actions addressed to men, witnesses, children, etc. Only one partner has a psychological program that overlaps with the SGBV activities, but the formulation and conceptualisation in the funding proposal do not seem related.
- Coverage analysis: as mentioned, geographical coverage is quite impressive. However, lack of gap analysis and possible remedial action or the need for extension is lacking. The impression of reacting to the availability of partners comes up from the project documents, although the field TAs have expressed their concern regarding presence and coverage and have tried to push partners towards areas with needs that have not been covered.
- Interface with local associations and NGOs providing legal support: not addressed systematically.
- Advocacy and promotion of protection measures, probably done through local partners: not evident in the reporting. What are the elements of violator profiles? Are violators civil perpetrators or there is a pattern of military perpetrators? How could risk be decreased?
- Participation in clusters and coordination meetings: little or no information on the relevance, usefulness, issues at stake, gaps, etc.

Effectiveness

54. Some concerns can be raised on the overall effectiveness of the SGBV response by the international community, to which DG ECHO contributes significantly. To be fair, DG ECHO funded interventions can be judged as effective, as many of the specific interventions funded by the International Community, namely the outreach and referral centers for SGBV. Programmes reach their target; numbers of beneficiaries foreseen are achieved, and even surpassed. But, as mentioned before, “many victims cannot access services: they do not get compensation, little is done for their reintegration and recovery, and the perpetrators remain unpunished. In addition, the value of women seems to have decreased socially and the whole gender aspect of submission and denial of women’s rights seems to be getting worse”.
55. The first limitation is the lack of systematic and reliable data of the phenomenon and its contributing factors. This affects the eventual dimension and adequacy of the response, the necessary adaptation to different contexts and profiles of SGBV. This also affects the issue of coverage, already raised, where a more fundamental gap analysis is needed. DG ECHO is clearly advocating for this deficit of data to be addressed, and the evaluation was unable to uncover why the UN mandated agency (UNFPA) does not invest more resources and capacity to address the issue, as well as integrate other efforts that could be useful (the alliance at global level on data management among UNFPA, UNHCR and IRC is not functioning in DRC). The eventual funding of UNFPA by DG ECHO provides an opportunity to influence in order for these aspects to be given the importance that they deserve globally, and specifically in DRC.
56. The issue of timeliness also requires some attention: As reaching victims within the first 72 hours of a violent episode is a major focus, and since this is rarely attained, a reflection on alternatives and a better understanding of the factors affecting late reporting seem advisable. DG ECHO is already addressing this issue and some partners have studied the factors influencing late seeking of care. Results show the need to better market services and improve their quality, among others. The evaluation has found, in some cases, the lack of an information system or adequate systematic case management and referral and

the persistence of a stigmatised attitude that, while pretending to protect the victim is actually limiting her/his access to care. The availability of PEP kits is uneven, and their utilisation seems erratic and dependent on the presence of an external supervision staff. In some cases, patients are referred to distant facilities to receive the PEP. In other cases, the exceptional occurrence of a victim showing up within 72 hours challenges the capacity and adequacy of the system (protocols are not well known and PEP can be even expired in this case). As mentioned before, moving the focus from reaching the indicator of the 72 hours towards the creation of quality and desirable programmes for reproductive health could be more productive, monitoring patterns of use and attendance of victims and the delays in showing up. Notwithstanding, the potential public health benefit of including in the PEP kit vaccination against Hepatitis B transmission should not be forgotten, given the high prevalence of this condition in the region. Any progress in this aspect should be concerted with health authorities and other donors, as implies policy decisions within the health system and requires assuring cold chain beyond the usual immunisation programmes.

57. The performance and capacities of DG ECHO partners is uneven in SGBV programs. Some of them are too accepting of the limitations of the Congolese health system in terms of access to services, quality of care and availability of drugs. NGOs present in the field for long periods of time and dedicated to the processes of LRRD tend to neglect an adequate integrated case management. Other NGOs are specialised and heavily involved in the issue of SGBV, supporting referral centers and having a vertical programme approach even if apparently providing integrated services. When including protection, they would not mention it in a DG ECHO proposal. Partners with outreach capacity and community mobilisation capacity offer a more integrated portfolio, although caution should be exercised to identify opportunistic behaviours prompted by the high interest value of SGBV among donors.
58. Most DG ECHO partners in the field frame protection weakly in their SGBV programs. This is actually a reflection of the structural weaknesses in properly addressing the protection of SGBV victims in DRC. Lack of leadership, confusion on data reporting and confidentiality issues, and the recent multiplication of fora and working groups in the context of the STAREC, affect the clarity of protection measures by partners.

Impact

59. The positive impact of the response is undoubtedly the awareness of the problem at local, national and international levels. The presence of referral centres that offer quality services also represents a positive permanent change (with the caution mentioned above not to create parallel systems). In general, it can be noted that access to services and reproductive health in general has been given attention and an overall improvement exists, although far from being enough to assure better outcomes in maternal and child mortality.
60. The negative impact, as has been noted, is the excessive attention given to SGBV and the linking of specific assistance to this type of victim, which creates incentives for opportunistic behaviour and false claims in order to get compensation and access to services. This has to be analysed and taken into account in a “do no harm” perspective. Although DG ECHO is already aware of this fact, it must also be mentioned that the quick rise in attention to SGBV is prompting a sort of opportunistic behaviour or donor driven interest by some agencies. Projects are mushrooming on the issue, and donors should be cautious so as not to promote weak or harmful initiatives that would jeopardise a sound strategy. Vertical programs, short term shots, double counting of cases to justify vague results, absence of a strategic approach or of added value to existing mechanisms are risks and constitute an already negative impact of the attention to the issue, driven by media or political interests. Additionally, it is well known that the high prevalence of fistula has more to do with poor reproductive health, long birth labor, and

poor birth attendance. Services for reproductive health have to be reinforced and victims and women in general must be granted access.

Strategic and operational Recommendations

Main findings & conclusions	Strategic recommendations	Addressed to
SGBV cannot be understood without adequately taking into consideration the relevance of other violations, the degradation of social and cultural mechanisms and their consequences on gender issues.	Integrate response to SGBV with measures to address other violations. Grave human rights violation patterns should not be neglected. Enlarge the focus to include violations against men and boys and children’s rights. (Cf. Para 3,4, 5)	All actors (IC, DG ECHO, partners, UN)
The excessive relevance given to SGBV compared to other forms of violence, and even the use of the “rape oriented” angle as opposed to a broader gender-sensitive approach, favours a vertical and specific approach in the case management of SGBV	Integrate SGBV within a more transversal gender approach. Incorporate a gender angle in all SGBV activities and programming. (Cf. para 6, 37)	All actors (IC, DG ECHO, partners, UN)
There is a general feeling that impunity and inadequate application of the rule of law is facilitating the increase of SGBV.	Direct clear signals in the form of law enforcement and prosecuting perpetrators. Advocate for improving access to justice for crimes of sexual violence, but in the context of a better functioning judiciary system. (Cf. para 20, 32, 33, 34)	Donors, GoDRC
The rise in civilian rape is related to the reversal of society’s norms and values and to the ongoing environment of impunity that exists in eastern DRC. Rape commercialization (claiming to be a rape victim to get compensations or access to health care) is beginning to be common. In some cases, claims for compensation are based on false allegations of rape.	Address and take into account the detected trend towards rape becoming a common practice and its commercialization. Reflect on the possible use of SGBV pre-eminence as a strategy to earn income. (Cf. para 11, 20, 34)	Donors, partners
Regardless of the magnitude of the sexual violence epidemic in eastern DRC, and notwithstanding the number of organisations devoting resources to sexual violence programs, rigorous data on sexual and gender-based violence in DRC is lacking. Baseline data is unclear, and the data that is available combines prevalence and incidence data. Sampling is limited and existing reporting procedures are poor.	DG ECHO should continue advocating and promoting the harmonisation of data to be collected and analysed in order to better shape humanitarian and LRRD responses to the phenomenon of SGBV in DRC. (Cf. Para 8, 56)	UN, cluster leads, donors, STAREC
The assistance to SGBV victims has a strong protection component that is not very well established in the DG ECHO funding process. The increase in reported cases of civilian rape, and statistically significant declines in the types of rape perpetrated almost exclusively by armed combatants (gang rape and sexual	Better understand the protection challenges in the environment, considering “do no harm”, access to victims and contextualize the characteristics of violations for each community. (Cf. Para 16,18, 51-54, 61)	All (UN, Donors, partners)

slavery), indicate an apparent shift in the nature of sexual violence.		
Lack of attention to the mental health consequences of violence in DRC is an important gap of the overall response	Integrate mental health and address PTSD as it is essential to handle the consequences of SGBV at the case management and community level. (Cf. para 31, 50)	DG ECHO, partners

Main findings & conclusions	Operational recommendations	Addressed to
Adequate services for victims of SGBV encompass case management from both a health and a psychological standpoint, and should include legal support and victim reintegration. The only rational way to handle the problem is through the reinforcement of local capacities and the integration of care. The creation of a parallel system will produce further stigmatisation, sideline essential aspects of the factors leading to the problem, and in the medium and short term, will decapitalise the already weak system and create vicious distortions.	Establish medical services and psycho-social care at the primary care level, and integrated in comprehensive sexual and reproductive health services easily accessible to all women. Preferably, provide care for rape survivors through local groups and local health centres. The establishment of vertical and parallel systems should be avoided. (Cf. Para 44,46,47)	Donors
Numerous factors affect a low level of victims seeking treatment early-on. These range from a lack of awareness at the community level to an inadequate availability of services in terms of geographical and economic accessibility.	Ensure outreach and access to victims through specific strategies in rural areas, addressing the problems limiting victims from seeking help in areas where services exist. (Cf. Para 27, 45)	Partners
Currently, the services available are atomized between family planning, maternal health, and postnatal care.	Explore the possibility of integrating programs of reproductive health, including outreach, awareness and education as well as additional components that could capture clients' interest. Specific indicators on SGBV could be included with the aim of reaching victims more quickly and providing prevention support and awareness to possible targets. Consider including Hepatitis B transmission prevention in post-exposure prophylaxis. (Cf. Para 49)	DG ECHO, GoC (MoH), partners
The evaluation found that in some cases the demand has to be properly established, that is, women require some training on what could be a good service for them. However, if progress is made in this sense, partners have to make sure that the services available will be adequate.	Establish quality standards for reproductive health services, assuring access to target groups (facilitate geographical access and assure free access), and market these type of services adequately, assuring awareness of its existence and adequacy of the supply and demand. (Cf. para 49)	DG ECHO, partners
It seems evident that DG ECHO tries to cover the area where SGBV seems more prevalent due to the conflict. Evolution over time indicates an increase in coverage and extension of services to other areas as well.	Maintain the current trend of presence and coverage in accordance with available data regarding prevalence and incidence, paying special attention to understanding the constraints and characteristics of each zone's SGBV profile. (Cf. Para 42, 43)	DG ECHO, partners
Recommendation 18 of gender review	Develop specific tools to support the gender	DG ECHO

	and protection dimension of interventions in SGBV (in line with recommendation 18 of the gender review).	
Recommendation 19 of gender review	Include guidance points in the Single Form related to protection and SGBV (recommendation 19 of gender review).	DG ECHO
Men follow local customs, which means fear of disease and feelings of shame and embarrassment after witnessing and failing to protect their wives from rape, and a tendency to believe that they have to reject their wives. The role of local custom is very important in creating an environment conducive to the stigmatisation and rejection of rape victims. Furthermore, evidence suggests increasing reports of male rape over the past several months	Establish counselling services for men whose wives and/or family members have been raped to address resulting shame and humiliation; this may include establishing and supporting economic solutions for men affected directly or indirectly by SGBV. (Cf. para 17, 30)	Partners
The attention to mental health problems and the consequences of the conflict on the psychological well-being of the population is very limited.	Develop mental health programs, integrated with the services available to address the psychological problems and eventual PTSD of different kind of victims, including those of SGBV. Partners could be asked to explore possibilities and to support existing resources in order to respond to needs. (Cf. Para 50)	Partners
Interface with local associations and NGOs providing legal support is not addressed systematically, while advocacy and promotion of protection measures, probably done through local partners, is not evident in the reporting.	Create working and strategic interfaces with field-based protection organisations. (Cf. Para. 54, 59)	Partners
Most DG ECHO partners in the field frame protection weakly in their SGBV programmes.	Strive to better frame protection within DG ECHO operations in a harmonised way. Some progress could be made in DRC using some initiatives like the Minimum Agency Standards for protection in assistance programs ⁵¹ or other available tools (like the IASC handbook of protection of IDPs). DG ECHO is encouraged to discuss with partners establishing objectives, intended results and activities geared toward protection, with adequate indicators. (Cf. para 51-54, 59)	Partners, DG ECHO
The increase in reported cases of civilian rape, and statistically significant declines in the types of rape perpetrated almost exclusively by armed combatants (gang rape and sexual slavery), indicate that there is an apparent shift in the nature of sexual violence.	Incorporate a better understanding of the patterns of violence in MONUC's mandate and establish innovative solutions. If attacks in an unstable area happen at night and in the victim's house, patrols and other measures should be established. (Cf. para 17, 18, 19)	MONUC
To constrain the recent trend of civilian perpetrated sexual violence, the	Aid organisations need to collaborate with local communities to identify new and	Partners

⁵¹ Inter-agency group: 2008.

<p>environment of impunity will have to be addressed and the status of women, as well as women's rights, will have to be advanced. Furthermore, the mentality of entire communities will likely have to be reset to recognise that rape is an unacceptable and punishable crime and to accept women as equal members of society.</p>	<p>innovative protection programs based on the most prevalent patterns of attack in the areas of intervention. It is necessary to promote non-military means of addressing security threats wherever possible. (Cf. para 20)</p>	
<p>Little is done for victims' reintegration and recovery, and the perpetrators remain unpunished. In addition, the value of women seems to have decreased socially and the whole gender aspect of submission and denial of women's rights seems to be getting worse.</p>	<p>Community-based interventions should seek to understand and provide clues on the evolution of community perceptions towards rape, civilian adoption of SGBV and other aspects of the already identified changes in the social fabric of Congolese communities. Programs should support women in developing alternative options to submission and becoming objects of rape. (Cf. Para 20, 25)</p>	Partners
<p>Management of traumatized witnesses should also be taken into account. The consequences of possible violent behaviour and perpetuation of rape practices in the community by those secondary victims (witnesses or forced perpetrators) should be addressed through specific programs.</p>	<p>Take care of children. In addition to assisting child survivors of sexual violence and children born out of rape, provide assistance to all children who have been indirectly affected by sexual violence. Care for children conceived of rape must also include support for the mothers. (Cf. Para 30, 31)</p>	DG ECHO, partners