**Best Practice 1: Sample Standing Operating Procedures (SOPs) for Individual Protection Cases**

TABLE of contents

[Introduction 1](#_heading=h.30j0zll)

[Objectives 2](#_heading=h.1fob9te)

[Abbreviations 2](#_heading=h.3znysh7)

[Principles 2](#_heading=h.2et92p0)

[What Is The Individual Protection Assistance? 4](#_heading=h.tyjcwt)

[What Is The Aim Of IPA? 5](#_heading=h.3dy6vkm)

[What Are The Ways To Use IPA? 5](#_heading=h.1t3h5sf)

[Steps To Follow When Using IPA 8](#_heading=h.4d34og8)

[Reporting 8](#_heading=h.17dp8vu)

[Standard Operating Procedures Document Annexes 8](#_heading=h.3rdcrjn)

# Introduction

As a country with the largest number of refugees in the world, Turkey is home to more than 3 million Syrians who are under temporary protection. The Syrian population under Temporary Protection has reached 3.5 million as of May 2018, with 90% of this population living in urban areas. In this context, the Community Centers Project started in order to respond to the human needs, which are increasing proportionally with the population growth in urban areas. Under the project, the first Community Center was opened for service in Şanlıurfa in January 2015. As of June 2018, there are 15 community centers in 14 provinces including Şanlıurfa, Istanbul (Bağcılar and Sultanbeyli), Konya, Ankara, Kilis, Bursa, Adana, İzmir, Mersin, Hatay, Gaziantep, Kahramanmaraş, Mardin and Kayseri.

The aim of the protection program, which is one of the programs carried out through Community Center, is to ensure and facilitate the access to the rights and services currently offered by the Government of Republic of Turkey or humanitarian organizations. Protection activities aim to determine the need for protection of vulnerable people/families, mainly migrants under temporary or international protection, those who have not applied for asylum yet, but also Turkish citizens when necessary. Through these activities, it is further aimed to carry out works for meeting these needs, to ensure that persons achieve sustainable solutions and strengthen and thus lead a life compatible with human dignity, as well as carrying out preventive activities in general terms.

# ObjectiveS

This document refers to the Standard Operating Procedures for the use of the Individual Protection Assistance (IPA). This document elaborates its specific and different uses, the principles required to be applied when assessing and supporting a case, and the steps to take to provide the assistance. It aims to standardize the use of IPA across all Community Centers, and to support the protection teams with clear rules and criteria.

This document may be regularly updated in accordance with the needs of the Community Centers Protection teams, as well as in coordination with donor needs, changing needs and practices.

# Abbreviations

MoLSF: Ministry of Labor, Social Services and Family

IPA: Individual Protection Assistance

SASF: Social Assistance and Solidarity Foundation

ESSN/SUY: Emergency Social Safety Network/Sosyal Uyum Yardımı

NGO: Non-Governmental Organization

SSI: Social Security Institution

CCTE: Conditional Cash Transfer for Education

WFP: World Food Programme

# Principles

*Keeping in mind the Seven Fundamental Principles of the Red Cross Red Crescent Movement in any action and work that is done, the following basic principles should be followed when performing a protection case intervention in IPA:*

* 1. **Do no Harm :** It ensures that the person and his/her family will not be exposed to further damages due to the interventions designed to support them. During the intervention process, protection program staff is responsible for ensuring the protection of the individual and the family against any further harm caused by actions, decisions or steps taken by the staff on behalf of the individual and the family.
* **Prioritization of the interests of individuals:** The interests of the individuals should be considered and prioritized in all decisions made and in all steps taken in the intervention process. Furthermore, the relevant principle must also provide a basis for the way of communication with the people and with the family.
* **Non-discrimination:** It ensures that individuals will not be discriminated because of their individual characteristics or their group (for instance, sex, age, socioeconomic background, race, religion, language, ethnicity, disability, sexual orientation or gender identity).
* **Adherence to ethical standards:** Professional ethical standards and practices should be respected and implemented.
* **Informed consent:** Informed consent is the voluntary agreement of a free individual who has the right to give a consent and who makes informed choices. Under all conditions, consent must be obtained from persons and/or caregivers regarding the services provided. In order to obtain informed consent, the protection program staff should ensure that the persons and their families fully understand the current services and existing choices, potential risks and benefits of using the services, the information to be collected by the staff, how and for what purpose they will be used, and the privacy and confidentiality limits.
* **Respect for privacy:** Confidentiality defines that sensitive information is limited and they are only shared with the individual and those who need it to protect the individual and his/her family. The information to be shared should only contain information that is “need-to-be-known” that can be helpful for the protection intervention. Respect for privacy requires service providers to protect information about beneficiaries and ensure that information is only accessible with the explicit permission of the beneficiaries. The principle of respect for privacy is the basis for all consultation stages.
* **Accountability:** Responsibility means that the person is responsible for the actions and consequences of his/her actions. Institutions and their staff involved in protection intervention are accountable for the person, family and community. Institutions and caregivers should comply with national laws and policies. Otherwise, internal or external ways of complaints are open.
* **Facilitating the participation of people:** People have the right to explain their views about their experiences and to participate in decisions affecting their lives. Staff is responsible for informing persons of their right to participate (including the right not to respond to questions that disturb themselves) and for supporting them to use this right in the protection intervention process.
* **Providing culturally appropriate processes and services:** Staff and institutions should acknowledge and respect the differences in the communities they work with and understand the differences of individuals, families, groups and communities.
* **Coordination and Cooperation:** Protection programs are more effective when they work with organizations and when they involve communities, families and people in their efforts. International organizations are obliged to coordinate their activities with public institutions and non-governmental organizations in order to ensure that existing systems are strengthened and similar services are not duplicated.

WHAT IS THE INDIVIDUAL PROTECTION ASSISTANCE?

Following ECHO guidance, as the donor of this programme, and the inter-agency SOPs, TRCS defines the Individual Protection Assistance as a time-bound intervention aimed at reducing, removing or preventing an individual’s protection risks through a simple, time-bound assistance focused on supporting access to existing services and on the respect of one’s rights.

Adhering to a ‘one-refugee’ approach, where the focus of the intervention is the individual rather than the family unit, both those under Temporary Protection and International Protection are eligible for IPA.

Key aspects of IPA are:

* It is focused on a specific and clearly defined protection outcome (e.g. decreased vulnerability, increased capacity, mitigated/removed threat or any combination of these). IPA should be used when there is only one specific need that is required one type of intervention. For example, if there is only need for transportation support in order to access health service but no other protection need, IPA can be used. The one type intervention does not have to be “one time”, there can be a need for a support in specific time period. For example, there can be a multiple transportation support in specific period (3 months, 6 months etc.) for the same need.
* IPA offers a defined package of possible support that includes referral, information counselling, assistive services (such as translation, transportation or accompaniment) and material assistance (in-kind). This support is combined as needed on a case-by-case basis to achieve the specific change linked to the protection outcome.
* TRC does not provide cash assistance. For any cash-related need, the case worker will refer the case to another organization that can provide cash support.
* Each case must be assessed individually, considering vulnerability and looking at prioritizing needs.
* Main focus of IPA intervention must be facilitation of access to existing services, both from the government and other NGOs. After the IPA support, one has to access any specific services such as health, education, cash support (ESSN, CCTE), legal support etc.

WHAT IS THE AIM OF IPA?

IPA can be provided to an individual when there is a specific risk or threat to this individual, which can be mitigated or eliminated through a one-off type of IPA assistance. There must be a defined protection outcome attached to the use of IPA.

A protection outcome[[1]](#footnote-1) is defined as a response or activity aimed at reducing protection risks to affected persons. A risk is reduced when the threats and vulnerabilities of a person are addressed and minimized, and the capacity of the individual affected is enhanced. This is why the use of IPA is related to the support for individuals in accessing services and basic rights. This will empower them and enable them. The reduction of risks, meanwhile, occurs when threats and vulnerability are minimized, and, at the same time, the capacity of affected persons is enhanced. Protection outcomes are the result of changes in behaviour, attitudes, policies, knowledge and practices on the part of relevant stakeholders.

The protection outcome for each individual case is unique to that specific case and individual. However, all protection outcomes share an emphasis on reducing vulnerability, increasing capacity and removing or mitigating threats. Express your protection outcomes clearly when filling in the approval form to justify an intervention. Remedial care for individuals who have already experienced a rights violation can also be provided under IPA.

WHAT ARE THE WAYS TO USE IPA?

As mentioned in the previous paragraph, the main purpose for using IPA is to facilitate access to services like health, education, legal services, registration, cash support (ESSN, CCTE) etc, through referrals, counselling or material assistance.

Referral to state services and state social protection or social assistance schemes is always the first option considered in IPA. In situations where state social protection or social assistance schemes are unavailable or inaccessible, they will still be used as a guide to provide comparable assistance of the same value.

IPA should be use for those who are financially unable to afford certain services. People in receipt of CCTE or ESSN support can receive IPA only if there is NO state service available for them and under exceptional circumstances.

The following list below presents some of the ways IPA can be used. Specific criteria can be found in the annex document on Guiding Criteria for IPA. Always keep in mind, when thinking of using IPA, the protection outcome related to this action. If no protection risk or outcome can be identified, then support will not be provided under IPA. Other options may be considered upon assessment from the case worker and guidance and approval from the HQ Protection Unit:

* Transportation: It is provided for those who need to go to another place due to several reasons such as health, education, and registration or legal reasons. It should be evaluated that whether transportation is provided via public services in referrals which are made due to health reasons. If the individual is unable to cover the cost of transportation; if there is no support provided by existing public services; and if the person has the necessary permits, transportation support is used. Airplanes, buses, trains and ferries may be preferred depending on the urgency of the transportation needs of the individuals. Transportation support does not cover urban transportation. For whichever transportation modality is chosen, the least expensive option will be selected (for instance, if flying is justified, the least expensive flight will be chosen).
* Accompaniment: It is provided for those who need someone to accompany them in order to reach a certain service provider, or who require assistance to be able to access a specific service. It can be linked to sectors such as health (e.g. accompanying to a hospital appointment) or education (e.g. accompanying a child for school registration).
* Translation (written, in person): No restrictions or limitations. This includes cost of sworn interpreters needed for legal, medical and some SGBV services.
* Accommodation / Emergency Shelter provision (in-kind ONLY): Referral to a shelter specialist organization within state institutions is preferred. However, if this is not possible shelter assistance in-kind can be provided through IPA. It includes emergency accommodation services that are met until individuals with serious threats to the right to life, those who have been exposed to sexual and gender-based violence, and victims of human trafficking have access to public services. Additionally, temporary accommodation is provided for those who must live in another city for several reasons such as health, education, legal support or registration or those who have no place to stay and are unable to afford accommodation because of their economic status. All alternatives provided by public institutions or local authorities (hospitals’ guesthouses, municipal guesthouses, etc.) should be checked before providing temporary accommodation and service should be provided as a last resort. Accommodation is provided in places recommended by the Turkish Red Crescent so as not to go beyond the scope of the allowance regulation. Individuals under the age of 18 must accommodate with their families. Rental support cannot be provided within the scope of accommodation.
* Core Relief Items (in-kind): usually in TRC there is no need for IPA to support people with core relief items as they can be referred internally to TRC branches or other NGOs. However, it is important to be aware of this option available under IPA if other alternatives become unavailable.
* Document Issuing Fees: These fees may cover any cost related to issuing documents, including, but not limited to, notary fees and consulate passport fees. Some document issuing fees may be covered by the Government of Turkey. If any such regulation is not exercised in practice, IPA can be used, but a note must be provided.
* Information and legal counselling: TRC offers free legal counselling to refugees in the Community Centres or through phone calls. Referrals can then be made to the Turkish Bar Association for free representation. Legal aid for civil cases (criminal cases are not covered) is provided free of charge to people under Temporary Protection through provincial Bar Associations. Any costs related to legal assistance can be covered under IPA (travel to court for civil cases, translation costs, specialist legal advice where the Bar Association cannot take on a case etc.)
* Education support: IPA can be used to provide school materials, uniforms or pay school tuition fees for a specific time period. This can be provided to remove or minimize the obstacles that impede the participation of education for children. It can be covered by IPA if the child identified presents protection risk, such as child labor or risk of child marriage case. For more general support to education, such as exam fee to enter university, it is not directly linked to protection but to education. Therefore, support can be provided under SNF.
* Medical Stuff: It includes medical equipment provided to persons with disabilities or health problems such as hearing aids, wheelchairs, prosthesis or orthosis. It is foreseen that the medical device support can be covered by IPA support if the persons are in need of medical stuff in order to access basic rights and services independently or with less dependence. For example, if a child is in need of hearing devices in order to go to school, IPA will be the suitable option

STEPS TO FOLLOW WHEN USING IPA



# FURTHER EXPLANATIONS ON USING IPA

* TRC has no defined budget limitations for IPA support. Each case is assessed in a unique way through the household visits, and the needs, threats, risks, resources of clients and resources of TRC are evaluated.
* For SGBV survivors, TRC provides accommodation support. However similarly to all other assistance, this assistance is meant for the emergency phase, until the beneficiary can access the governmental services.
* For UAMs, TRC cannot provide accommodation without any exceptions, due to national regulations.
* The subsistence regulation (Harcırah Yönetmeliği) defines the per-diem and accommodation limits, and accommodation limits can change. In cases where TRC cannot find any accommodation alternative within subsistence regulation, further coverage can be possible.
* TRC does not have any specific limitations in providing assistance to families who are benefiting from ESSN and CCTE. However, families that do not benefit from ESSN and CCTE may be prioritized for assistance.
* The permanent and substitute members of SNF committee should be regularly checked and revised if necessary.

# documentatıon

* Ensure that below documents added to the case folder:
  + Decision of administrative committee
  + Signed approval form
  + Social inquiry form
  + Medical reports
  + Prescriptions
  + ID copy
  + Price quotes (if necessary)
  + Handover report
  + Photograph showing the delivery
  + Any other relevant document related to assessment or delivery process,
* Ensure that no documents are to be left unattended on top of or inside the desk or in the counselling room.
* Store all the above mentioned hard copy documents in the case folder and all case folders in locked cabinets.

# Reporting

The services provided are kept in Excel documents shared with teams and updated on a regular basis by the reporting team. The said Excel documents are shared with the reporting and protection center team every 15 days (mid and end of each month).

# Standard OPERATING Procedures Document Annexes

Annex-1: Approval form

Annex-2: Sample decision of administrative committee

Annex-3: Guiding criteria

Annex-4: Case Follow-up Chart

Annex 5: Vulnerability Codes

1. IASC Protection Policy, September 2016 [↑](#footnote-ref-1)