IASC’s Operational Policy and Advocacy Group (OPAG) Meeting
SESSION V
18 June 2020
Summary Record

INTRODUCTION

The Operational Policy and Advocacy Group (OPAG) of the Inter-Agency Standing Committee (IASC) held the fifth session of its third regular meeting on 18 June 2020. The primary objectives of this session was to (i) discuss how the humanitarian system can respond to rising protection challenges as a result of COVID-19 with a view to ensuring a more coherent response to address people’s survival and protection as well as to better engage in an integrated response beyond public health measures; and (ii) discuss progress made by the Results Group 1 on Operational Response on the OPAG-agreed 2020 workplan and its reprioritization as a result of COVID-19.

SESSION 5.1: PROTECTION RISKS IN LIGHT OF COVID-19

In her introductory remarks, the OPAG co-Chair, Ms. Valerie Guarneri noted that a range of protection issues were brought up at the recent IASC Principals discussions around COVID-19. The Principals noted concerns that the pandemic was interfering or overlapping with the complex population movements from the past few years, including in the Mediterranean and Central America and Bangladesh. Furthermore, it was noted that access to people in need was a major challenge due to lockdowns, which concentrated people in border areas and prevented them from crossing. As a follow-up to the OPAG’s virtual meeting on 30 March where several members raised concerns over rising xenophobia due to COVID-19, the session focused on stigmatization and the associated issues of xenophobia, racism, discrimination and hate speech. This focus was appropriate given that, as a result of COVID-19, stigmatization, as a common underlying dynamic, was creating and exacerbating risks of violence, coercion and deliberate deprivation of vulnerable people.

The co-Chair of the IASC Results Group 1 on Operational Response, Mr. Rein Paulsen, welcomed the opportunity to focus OPAG’s attention on rising protection concerns in light of COVID-19 and introduce the Results Group 1’s ongoing work in that regard. The discussion was timely and relevant, given that the IASC Principals agreed on 16 June to identify opportunities to strengthen the response to the rising concerns of racism and discrimination, which is to be led by OHCHR in consultation with the OPAG. It was of grave concern that the pandemic had given rise to new threats and exacerbated the vulnerability of the least protected in society, particularly women and children, displaced people and migrants, people with disabilities and older people. Against this backdrop, there was an increasing need to ensure protection considerations shape the humanitarian response, taking into account the threats people were exposed to, who was vulnerable and why, and what capacities people had to address these threats. The IASC has an obligation to make these risks central to humanitarian actions per the IASC Principals Statement on the Centrality of Protection in Humanitarian Action of 2013 and the IASC Protection Policy of 2016.

During the introductory presentation, the co-leads of the centrality of protection sub-group, Ms. Jenny McAvoy and Ms. Dina Abou Samra, shared an overview of key issues and trends related to stigma in the COVID-19 pandemic, as well as actions recommended for the OPAG’s consideration. They noted that the public health implications of stigma were manifesting themselves, including social and psychological
isolation and hampered access health services. Risk of violence and conflict was also heightened, feeding on pre-existing ethnic, religious and political stigma, and exacerbated by the rapid propagation of disinformation and stigma via social media. Recent humanitarian crises (such as in Rakhine) have rapidly escalated into mass violence, in part, as consequence of the widespread and rapid promulgation of stigma and hate speech. The pervasiveness of stigma in the COVID-19 pandemic, and the potential severity of its consequences, warranted elevating this issue for a whole-of-system effort to anticipate and reduce risks. Several actions were suggested for the OPAG’s consideration, as presented in the background paper “Countering Stigmatization in the Context of COVID-19”, including but not limited to: (i) encourage governments to counter and address stigma publicly as an explicit part of COVID-19 national prevention and response plans [HCs and HCTs]; (ii) work with civil society, community-based platforms and media to support digital literacy [Inter-agency community engagement and risk communication platforms]; (iii) mobilize comprehensive and timely community engagement and risk communication as soon as harmful patterns are identified [HCTs]; (iv) collect, monitor and analyze incidents, manifestations of stigma, and trends to support early warning, timely action, and effective responses to widespread harm [GHRP and other global level analysis platforms, Clusters/Intercluster, Preparedness, Early Action and Readiness sub-group]; and (v) monitor and detect online propagation of stigma and carry out accurate, clear and evidence-based information and awareness raising campaigns against it [HCS and HCTs, GHRP platform, specialized organizations]. The intention behind the paper and discussion was to recognize the scale of stigmatization related to COVID-19 – and the severity of its consequences – and consider how to build on existing efforts to ensure that our strategy effectively anticipates and reduces the risks people face in this crisis. In addition, potential topics for future OPAG discussions on protection implications of COVID-19 were also suggested, including the protection of civilians in armed conflict, deprivation of liberty and restricted population movements.

In the ensuing discussion, UNICEF, fully endorsing the proposals, noted the importance of discussing stigma in light of COVID-19 not only as a matter of protection but also as a broader concern in terms of public health responses, considering that stigma prevents people from volunteering for testing. Moving forward, further thoughts were needed as to how to reflect different dimensions of protection into the COVID-19 Global Humanitarian Response Plan (GHRP) revision process, how to link up with other workstreams, notably the Risk Communication and Community Engagement (RCCE), and how to broaden campaigns around stigma against humanitarian workers at a global level.

InterAction noted the significance of the issue in terms of both preventing the spread of the virus but also preventing further harm. It would be meaningful to have a status update on the joint assessment and analysis function to be created as part of the GHRP Scale Up Protocols to ensure its focus on monitoring the issues around stigma and its implications. It is key to tap into collective strengths within and beyond the IASC, including those not present in the IASC such as ACAPS, Translators without Borders and peace-building actors, given the complexity of the issue and their uniquely relevant specializations.

UNHCR, while fully endorsing the background paper and its recommendations, underscored the need to treat protection as central to all issues addressed by the IASC. This was important not least due to the fact that protection concerns were intensifying in the time of COVID-19, including rising violence and over 600,000 new displacements registered between March and May in places like Libya, Chad, Cameroon and Afghanistan. The impact of stigmatization on health and humanitarian status were becoming more pronounced amidst arbitrary detention and restrictions on movement, combined with the socio-economic impacts. Echoing UNICEF, UNHCR noted that further thoughts are needed as to how to reflect the broader dimensions of protection into the GHRP. The stigmatization against humanitarian workers could also be tied to the Do No Harm discussion as it was critical to protect health workers from any stigmatization and to take
the utmost precautions for them. In terms of relevant actions within the IASC, UNHCR noted that the Results Group 3 on Collective Advocacy was currently developing key protection advocacy messaging, while UNHCR was updating the guidance on HCT protection strategies.

SCHR stressed the criticality of community participation, echoing UNICEF, while also noting the potential of using NGO voices where the UN was constrained from interacting with the community. SCHR further noted the potential of using the “#Nottotarget” framework to avoid stigma against humanitarians and the possibility of conducting political economy analysis which could be useful to understand the dynamics behind increasing use of stigma by governments to distract people from policy failures.

The co-Chairs of the IASC Results Group 1 agreed on the merit of re-examining particular issues around stigmatization to be highlighted in the GHRP update and invited agencies to provide relevant inputs. Attention to stigmatization should be maintained, as the GHRP will be folded under the Global Humanitarian Overview (GHO) after the upcoming update. The monthly reporting and programmatic reporting of the GHRP should also be capitalized to promote relevant concerns. Following the launch of the next iteration of the GHRP on 16 July, collective efforts could be made to ensure that the Principles consider spotlighting this issue to the media. Regarding the joint assessment and analysis cell to be set up under the GHRP process, members were informed that its strength would lie in the participation of actors beyond the UN and traditional boundaries. The cell will focus on responding to requests for field support, while its analysis will be driven by what country teams articulate as priorities, which presents opportunities to flag concerns around stigmatization. Further discussion was needed, however, to find a right place to consolidate analysis to facilitate better response and programming.

UNDP stressed the importance of exploiting the opportunity brought by COVID-19 to address root causes, particularly in relation to the roles of governments. Results Group 1 suggested an action in this regard, namely to encourage governments to counter and address stigma publicly and ensure that stigmatizing and discriminating behaviors and practices are identified and stopped as an explicit part of COVID-19 national prevention and response plans. Advocacy efforts should be made with the OECD DAC donors to put pressure on concerned governments. Further thoughts are needed to influence governments planning around the socio-economic framework beyond COVID-19.

OHCHR highlighted the confusion between the two concepts of stigma which is COVID-19-related, and discrimination which is not confined to the COVID-19 context. While agreeing with the need to reflect protection concerns around stigmatization in the GHRP, OHCHR stressed the need to include relevant revisions based on facts or data, identifying cases of stigma and developing advocacy where needed.

IOM appreciated consideration for migrants in various recommendations around hate speech and xenophobic narratives which were increasingly exposing migrants to greater vulnerability to exclusion and violence, as they are often perceived as disease carriers. Given chronic underfunding on protection, advocacy efforts for sufficient resources to be allocated to protection actors in the COVID-19 response should continue, as well as for the Humanitarian Country Teams (HCTs) to prioritize protection. IOM fully embraced the background paper, while noting the need to consider other protection concerns beyond COVID-19.

The co-leads of the centrality of protection sub-group underscored the need to advance from country-level analysis to global trend analysis with a view to enabling anticipatory detection and mitigation against patterns of violence. It was also crucial to integrate work already being undertaken by other actors, including on broader conflicts, persecution, and genocide, as well as to capitalize on existing communication capacities by working with national media outlets and journalists. In this sense, IASC members should avoid duplicating capacities but rather seek to tap into and integrate work undertaken by relevant specialists. It was noted that
The role of Humanitarian Coordinators (HCs) was critical to mobilize expertise and undertake dialogue with national governments, so they could play a more proactive and positive role in tackling stigma within the framework of national strategies. The co-Chairs of the IASC Results Group 1 noted they would reach out to OHCHR with regard to the Principals tasking to identify opportunities to strengthen the response to the rising concerns of racism and discrimination. The OPAG was requested to share suggestions on other key protection concerns which warranted future consideration of the OPAG and the Results Group.

The OPAG co-Chair, Ms. Guarnieri, suggested that while discussing stigmatization in COVID-19 contexts was meaningful as a starter, it was equally important to focus on broader issues of racism and discrimination moving forward. The importance of drawing upon resources beyond the humanitarian system was echoed to tackle root causes. The Results Group 1 was requested to ensure better linkages with other key actors and ongoing initiatives. UNICEF, UNHCR, and IOM endorsed the recommendations proposed in the background paper (see Annex A). The OPAG members were requested to explore ways to embed some of the suggested actions into the GHRP and provide guidance as to how to tackle protection concerns from a normative and wholistic perspective. The Results Group 1 was requested to prioritize the suggested actions.

**Follow-Up Actions:**

1. Prioritize the recommendations to address stigmatization in light of COVID-19, including on measures to address stigmatization targeting humanitarian workers [*OCHA in consultation with IASC members*]

2. Ensure that protection analysis and the actions required to reduce the risks associated with stigmatization are appropriately reflected in the revised GHRP due on 16 July [*OCHA in consultation with OPAG members*]

3. Review the paper and recommended actions in *“Countering Stigmatization in the Context of COVID-19”* and integrate relevant considerations and specific actions into ongoing work [*All Results Groups and IASC Members*]

4. Propose how protection can be better integrated in other IASC Results Groups and IASC subsidiary bodies [*UNHCR*]

**SESSION 5.2: PROGRESS UPDATE - RESULTS GROUP 1 ON OPERATIONAL RESPONSE**

The co-Chair of the Results Group 1, Mr. Julien Schopp highlighted the eight priority areas of work that had been taken forward by the group as follows: (i) Support centrality of protection through developing agreed, specific and measurable indicators on protection in practice; (ii) Address bureaucratic impediments imposed on NGOs; (iii) Strengthen humanitarian leadership; (iv) Strengthen the IASC Early Warning and Early Action Analysis; (v) Finalize the revision of the ERP guidance; (vi) Support efforts to operationalize localization; (vii) Facilitate the development of the new "joint system-wide operational guidance on data responsibility"; and (viii) Review the Humanitarian Programme Cycle tools and monitor field compliance (completed). Key achievements made in support of the COVID-19 response include the development of the *IASC Interim Guidance on Emergency Response Preparedness (ERP) Approach to the COVID-19 Pandemic* (*developed*)

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1 OCHA has engaged in consultations to ensure a more pronounced feature on protection analysis in the GHRP revision, based on stronger agency inputs from OPAG members, including the NGO consortia, UNHCR, UNICEF, IOM and UNFPA on different aspects of protection. OCHA also conducted a cross-cutting analysis of all country inputs to identify common trends with respect to protection risks in the context of COVID-19 and to show specific examples of results and challenges. OCHA will also continue the production of GHRP monthly progress reports. The August issue is expected to have a focus on protection, with the support of UNHCR.
by OCHA and UNICEF); the IASC Interim Guidance on Localization and the COVID-19 Response (developed by IFRC and UNICEF); and an FAQ on Data Responsibility in the COVID-19 Response (developed by the OCHA Center for Humanitarian Data). Several ongoing deliverables were adjusted to reflect the impact of COVID-19. For example, the ongoing update of the “Introduction to Humanitarian Action - A Brief Guide for Resident Coordinators” will shift its focus to areas most relevant to the COVID-19 response, including for Resident Coordinators performing HCs functions. The latest iteration of the IASC Early Warning, Early Action and Readiness (EWEAR) analysis (May - October 2020) also considered COVID-related risks in identifying risks and preparedness actions, while the EDG agreed that the scope of the analysis should not be limited to COVID-19. The Results Group 1 has also continued efforts to advance its ongoing workstreams. Various deliverables are being delayed, as they are put on hold to avoid overburdening field colleagues with additional requests for feedback.

In the ensuing discussion, UNDP suggested considering the possible multiplying and catalytic impact of funding national authorities versus funding local NGOs and UN agencies on the ground. UNDP further invited the Results Group 1 to consider localization within the context of strengthening national systems and ownership. UNHCR and FAO noted that in their view localization comprised both local NGOs and local authorities and governments. OHCHR reiterated that stigmatization does not encompass discrimination, considering that discrimination is rather denial of access. This makes it hard to confine discrimination under any specific mandate. In this regard, OHCHR stressed the need to also consider the deprivation of liberty as a major protection concern.

The Foundation for Rural Development (FRD) noted that local authorities and governments, together with local NGOs, are key actors in localization. When the COVID-19 struck Pakistan, local NGOs and actors helped local disaster management authorities to establish a coordination system for overall response. FRD further requested the Results Group 1 to expedite its work around bureaucratic impediments on NGOs, considering the urgent needs from the field. InterAction requested further updates on the planned review of the IASC Protection Policy, which could be of great interest to the OPAG in terms of how guidance and policies are being implemented and what lessons learned are gathered from different field teams.

UNHCR stressed that protection was not receiving due attention, noting that it was being discussed as one of the eight deliverables under a particular Results Group. In that regard, UNHCR stressed the need to elevate the centrality of protection agenda as a whole and noted it would share suggestions for the OPAG's consideration on how to balance the centrality of protection with other working modalities. FAO noted the possible cross-fertilization between the OPAG and the EDG around protection and other cross-cutting issues. The OPAG co-Chairs proposed considering creative ways of working out of the conventional way of tasking individual Results Groups in this regard. They also agreed on the need for closer interaction between the OPAG and EDG both structurally and substantively, while acknowledging the clear division of labor. The OPAG members who also participated as members of the EDG were requested to facilitate the engagement by cross-sharing updates on issues of common interest, including on protection.

The co-Chair of the Results Group 1, Mr. Schopp, noted that while there was no philosophical difference in terms of including national governments within the localization discussion, the Results Group 1 was meant to focus on representation of national actors within the coordination structures, as a way to complement other ongoing efforts around localization. As to broader local governments engagement, UNHABITAT was working within the Results Group 1 to draft a framework for better engagement with local government in humanitarian operations. The request to zoom out on protection to include deprivation of liberty and

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2 Please see the accompanying “IASC Results Group 1 Progress Report (November 2019 - April 2020)” for further information on the status of ongoing workstreams.
discrimination will be considered by the centrality of protection sub-group. Members were informed that challenges persist in terms of accelerating the bureaucratic impediments workstream due to lack of participation from UN agencies, while InterAction and ICVA, leading this workstream, are committed to delivering, nonetheless. Various workstreams under the Results Group 1 have been taken forward on the EDG’s request for policy support, including around protection, bureaucratic impediment and early warning and early action.

ICVA acknowledged its full support to the bureaucratic impediments workstream, while requesting more active inter-agency engagement, as underlined by InterAction. FRD also requested UN agencies to share stance on how they could be more involved, considering that bureaucratic impediments were creating hurdles for overall programming.

The co-leads of the centrality of protection sub-group briefed the OPAG on the status of the planned five-year review of the IASC Protection Policy of 2016. In particular, for the OPAG’s awareness, the co-leads highlighted two aspects of how the review was being approached. First, it will examine not only how the IASC Protection Policy is being implemented in the field, but also how the ways of working set out in the Policy have been embraced in organizational policy and practice, including that of donor governments. Second, it was noted that while it is envisaged that the review will be carried out by independent consultants, past experience suggests that this can result in limited buy-in for the findings and recommendations. As such, the terms of reference are being developed with a view to incorporating a number of diverse methods to build direct engagement of humanitarian actors during the process, such as workshops to delve deep into the key issues and barriers to implementation of the Policy. The terms of reference of the review will be submitted for the OPAG’s review and comments in coming months.

The co-Chair of the Results Group 1, Mr. Paulsen noted an inherent challenge faced by the Results Group 1 with its focus on operational response to constantly take into account operational needs identified by the Principals and the EDG from normative perspectives. Results Group 1 was the only Results Group that added additional priority areas of work for 2020 in response to this inherent tension. Results Group 1 will continue to focus on issues of operational response where the most value can be added from a strategic perspective, which is becoming even more important in the current resource-constrained environment.

The OPAG co-Chairs noted the OPAG’s broad support for the Results Group 1’s work, including its efforts for reprioritization in light of COVID-19. UNHCR will submit proposals on how consideration of the centrality of protection can be heightened within OPAG, considering that it goes beyond the remit of the Results Group 1 and its protection sub-group. While UNHCR will take this forward, Results Group 1 was welcomed to provide inputs. Results Group 1 was further requested to consider how to prioritize addressing bureaucratic impediments both within the Results Group and more fundamentally across the system.

Follow-Up Actions:

5. Support the Results Group 1’s broad workplan, including its rapid reprioritization in support of the COVID-19 response [OPAG]

6. Re-prioritize the work around bureaucratic impediments given its relevance to the current response [Results Group 1]
The OPAG co-Chairs noted that the sixth OPAG session would take place on Friday 19 June, which would be an opportunity to have a follow-up discussion on localization as well as to discuss the shared responsibility around duty of care for all humanitarian workers. The OPAG co-Chairs concluded by thanking the OPAG members and presenters for their constructive engagement throughout the meeting and their continued work in support of the normative work of the IASC.

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ANNEX A: SUGGESTED ACTIONS - COUNTERING STIGMATIZATION IN THE CONTEXT OF COVID-19

1. Condemn COVID-19-related stigma, including hate speech, and promote messages of humanity, inclusion, solidarity, and human rights, particularly freedom of opinion and expression and the right to equal treatment and non-discrimination; Express solidarity with victims and support those who challenge and counter such expressions, such as political leaders and other influential figures. [IASC Principals, Humanitarian Coordinators, and Humanitarian Country Teams]

2. Encourage governments to counter and address stigma publicly and ensure that stigmatizing and discriminating behaviors and practices are identified and stopped as an explicit part of COVID-19 national prevention and response plans. This should include reinforcing existing obligations of security forces and law enforcement entities under domestic and international law, including with respect to harmful online speech. The requisite expertise should be mobilized as needed to support practical recommendations for governments. [Humanitarian Coordinators, Humanitarian Country Teams]

3. Take steps to counter hostility and hate speech directed at vulnerable and excluded groups, including but not limited to migrants, IDPs, returnees, refugees, and ensure pandemic responses do not make these populations more vulnerable to violence and discrimination or prevent them from accessing care. Ensure that online and offline victims of stigmatization, especially vulnerable or marginalized groups, know where to access and have access to relevant services, including psychosocial support through national helplines and legal remedy if available. [All clusters, intersectoral response planning, all operational actors]

4. Work with civil society and community-based platforms and networks (including Community Based Protection networks, social media, radio, and television) to support digital literacy and to undertake two-way communication with communities – in local languages – on their role in preventing stigmatization, mitigate the spread of disinformation and misinformation, build community trust and ensure frequent sharing of information. This should incorporate messages aimed at mitigating the risk of violence against health workers. [Interagency community engagement and risk communication platforms]

5. Mobilize comprehensive and timely community engagement and risk communication as soon as harmful patterns are identified. [Humanitarian Country Teams]

6. Collect, monitor, and analyze incidents, manifestations of stigma, and trends of discrimination and exclusion to support early warning, timely action, and effective responses to widespread harm, including the risk of violence, at country and global levels. Collection, disaggregation, and analysis of data should enable humanitarian actors identify and address inequalities, and structural discrimination that contributes to poor health outcomes, including for COVID-19, and risks of targeted violence. [GHRP, and other global level analysis platform/s; Clusters/Intercluster; RG 1 Preparedness, Early Action and Readiness Subgroup]

7. Monitor and detect online propagation of stigma, disinformation and misinformation, rumors, and misperceptions and carry out accurate, clear and evidence-based information and awareness raising campaigns against stigma, discrimination, and xenophobia, including by building relationships with national and local level journalists, media outlets, and national and local opinion leaders. [Humanitarian Coordinators/Humanitarian Country Teams, GHRP platform, for example by engaging the capacities specialized organizations]

8. Collect and share good practices, resources, knowledge to address COVID-19 stigma and discrimination [GHRP platform]
## ANNEX B: PARTICIPANTS LIST

<table>
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<tr>
<th>Role</th>
<th>Names and Organizations</th>
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| OPAG Co-Chair               | Ms. Valerie Guarrieri, Assistant Executive Director, WFP  
Mr. Geir Olav Lisle, Deputy Secretary-General, NRC |
| FAO                         | Mr. Daniele Donati  
Ms. Fiona Arnone |
| ICRC                        | Ms. Avigail Shai |
| ICVA                        | Ms. Mirela Shuteriqi  
Mr. Jeremy Wellard |
| ICVA - ACBAR                | Ms. Fiona Gall |
| ICVA - COAST                | Mr. Rezaul Karim Chowdhury |
| ICVA - FRD                  | Mr. Azmat Khan |
| ICVA - IMC                  | Ms. Mary Pack |
| IFRC                        | Ms. Victoria Stodart |
| InterAction                 | Ms. Kate Phillips-Barrasso |
| InterAction - Care USA      | Ms. Sheba Crocker |
| InterAction - Global Communities | Ms. Pia Wanek |
| IOM                         | Ms. Tristan Burnett  
Ms. Angela Staiger |
| OCHA                        | Mr. Rein Paulsen  
Ms. Penelope Muteteli |
| OHCHR                       | Mr. Roberto Ricci |
| SCHR                        | Mr. Gareth Price Jones |
| SCHR - Christian Aid        | Mr. Michael Mosselmans |
| SCHR - Save the Children International | Ms. Leah Finnigan |
| UNDP                        | Mr. Romano Lasker |
| UNHABITAT                   | Mr. Filip Decorte |
| UNHCR                       | Mr. Arafat Jamal |
| UNICEF                      | Ms. Manuel Fontaine  
Ms. Segolene Adam |
| WFP                         | Mr. Brian Lander |
| WHO                         | Mr. Rudi Coninx |
| World Bank                  | Mr. Jos Verbeek |

**Presenters:**  
Mr. Julien Schopp and Mr. Rein Paulsen, co-Chairs of the Results Group 1 on Operational Response

**IASC secretariat:**  
Ms. Mervat Shelbaya, Head of the IASC secretariat

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