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DIRECTORATE-GENERAL FOR EUROPEAN CIVIL PROTECTION AND
HUMANITARIAN AID OPERATIONS (ECHO)

DG ECHO PROTECTION KEY OUTCOME INDICATOR (PKOI)

– TECHNICAL GUIDANCE –

INDICATOR: % of individuals/target population in a given context reporting an improved feeling of safety (with dignity) by the end of the intervention compared to at the beginning.

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1 – PURPOSE OF THIS GUIDANCE

The Protection Key Outcome Indicator (PKOI) was formulated in 2017 in response to the need to measure protection results at the outcome level, in line with DG ECHO Key Outcome Indicators in other sectors. The PKOI has been piloted (for four years) by DG ECHO and partners in more than 130 actions across different regions and crises. The results, challenges and lessons learnt throughout the process have been compiled in a recent Desk Study for DG ECHO.

The PKOI is intended to serve as a tool to measure outcomes and inform decision-making around humanitarian protection. However, it should not be seen as a static solution but rather as a dynamic instrument that adapts to changing contexts and emerging challenges. Regularly updating and improving the PKOI based on real-world experiences of DG ECHO and partners will contribute to more effective humanitarian protection efforts.

This Technical Guidance aims to provide partners with practical information on measuring and reporting on the PKOI.

2 – DG ECHO AND THE MEASUREMENT OF PROTECTION AT THE OUTCOME LEVEL

The principal objective of the European Commission in humanitarian protection is to prevent, reduce/mitigate and respond to the risks and consequences of violence, coercion, deliberate deprivation and abuse for persons, groups, and communities in the context of humanitarian crises.

In the field of protection, measuring outcomes, especially at the individual level, is a complex task: Protection outcomes are influenced by many external factors and can vary widely among different groups due to their differing protection-specific needs and

risks. Measuring outcomes involves assessing the extent to which affected individuals' rights and their safety (with dignity) are upheld during a humanitarian crisis. This field is continually evolving, as the humanitarian community gains a deeper understanding of the complexities and challenges involved.

A valuable proxy indicator for protection outcomes consists of measuring the feelings of safety (with dignity) of beneficiaries of a humanitarian protection action. While safety is a complex and multifaceted concept, it often manifests in individuals' perceptions, emotions, and experiences. Measuring the feeling of safety with dignity:

- Incorporates the subjective experience of safety (with dignity).
- Provides a comprehensive insight: Beneficiaries' feelings of safety with dignity can encapsulate a wide range of factors, including physical security, well-being, cultural respect, and more.
- Provides contextual relevance: Different beneficiaries have unique safety concerns. Measuring their feelings of safety takes these concerns into account, ensuring that the action is tailored to the specific risks and protection needs of the target population.
- Allows to overcome the discussions between quantitative and qualitative data when measuring protection: While feelings are subjective, they can still be captured in a structured manner through surveys, hence providing actionable insights for action planning and evaluation.

In conclusion, measuring feelings of safety (with dignity) provides a window into the complex dynamics of protection outcomes brought about by a humanitarian protection action. While it does not provide an absolute measure of safety, it offers a valuable and nuanced perspective and actionable insights that can guide the evaluation of humanitarian protection actions.

3 – THE PROTECTION KEY OUTCOME INDICATOR (PKOI)

The PKOI is defined as follows:

% of individuals/target population in a given context reporting an improved feeling of safety (with dignity) by the end of the intervention compared to at the beginning.

A quick glance at the indicator:

- “Safety” must be qualified and contextualised, using the information from the risk analysis.
- A solid baseline, encompassing the variables to be addressed and best qualifying safety with dignity in that particular context, needs to be established at the start of the intervention, and measured again at the end of the intervention.
- Attribution should be incorporated into the measurement of the PKOI.
- Absolute numbers and disaggregated numbers by age, sex and disability must be provided.

Reminder: The importance of the risk analysis

A proper risk analysis is a requirement for any action funded by DG ECHO, and the entry point to designing humanitarian interventions. It identifies threats and vulnerabilities related to safety that beneficiaries face in a specific context. In the case of protection actions, the risk analysis allows for the definition of context-specific variables affecting safety that merit inclusion in the PKOI.

The risk equation methodology (as per DG ECHO protection guidelines) remains the most appropriate and straightforward technique for carrying out a risk analysis. As DG ECHO Humanitarian Protection Policy reads:

“By applying this approach, protection needs of a given target population are presented as risks, so that the protection needs may be determined by assessing the threats faced, and the vulnerabilities and capacities possessed in relation to those threats” The results of the risk analysis will serve as entry-points in order to design interventions whereby risks are mitigated through a reduction in threats and vulnerabilities, an increase in capacities, or through a combination of both.

Risk = $\frac{\text{Threats} \times \text{Vulnerabilities}}{\text{Capacities}}$

Partners can find a detailed explanation of the protection risk analysis in DG ECHO Humanitarian Protection Policy (page 9).

4 – BUILDING THE PKOI: THE CONTEXTUALISATION OF SAFETY (WITH DIGNITY)

Safety (with dignity) must be contextualised and qualified in each situation based on the elements identified in the risk analysis and the specific objectives of the action.

This is the sequence to follow for the contextualisation of the PKOI questions:

- a) Assess the risks beneficiaries face (risk analysis)
- b) Design the action, including the objectives to be achieved and the activities intended to mitigate those risks and consequently enhance the beneficiaries' feelings of safety (with dignity)
- c) Select the PKOI variable(s), and subsequently, the survey question(s)

Examples:

Identified risks related to lack of legal documents:

Lack of legal documents (ID, birth certificate, etc.) or legal knowledge impede beneficiaries' ability to exercise their rights:

Possible contextualised objectives regarding protection (to tackle the above risks):

- Beneficiaries improve their protection situation by being able to get access to legal documents.
- Beneficiaries improve their protection situation by getting legal advice and legal representation before (authorities) about (...).

Possible PKOI variables incorporating contextualised safety:

- % of the target population reported feeling safer due to / owing to an improved access to legal documents.
- % of the target population reported feeling safer due to / owing to an improved access to legal representation or advice.

Identified risks related to lack of freedom of movement:

Members of a social minority are afraid to move around within the community to address their daily needs due to harassment or theft by small hostile gangs from the host community:

Possible contextualised objectives regarding protection (to tackle the above risks):

- Community protection committees are created and take adequate protective action when security incidents arise.
- Host community members become more aware of and able to prevent and react to hostile actions against individuals of (...social minority...), by means of a series of participative, educational activities.

Possible PKOI variable incorporating contextualised safety

- % of the target population reported feeling safer due to enhanced freedom of movement (in a given area).

Please note that:

- The contextualisation of safety must be decided at the beginning of the action, in light of the risk analysis and the objectives and activities that will tackle those risks. In other words, contextualising the PKOI should be done before the action starts, as the PKOI must be included in the submitted Single Form (SF). If this is not possible, e.g., in case of activities in a new area of operation, it should be done at the onset of the action and the PKOI target should be inserted through a modification request within 3 months of the start of the action.
- Depending on the specific risks beneficiaries face, there can be different variables to measure the indicator, that is to say, there can be different objectives that may tackle the specific risks and hence will influence the feelings of safety.
- The feeling of safety may not improve if the selected objective and the implemented activities do not address relevant or main safety (with dignity) concerns about a particular risk (as per the risk assessment). For example, a safe space for children may not sufficiently address the main safety concerns regarding beneficiaries' fear of moving around to respond to daily needs.
- As risks and perceptions of risk vary within a population and over time, it is essential to survey different groups of people, such as women, children, elderly people, or minorities, and regularly update the risk analysis.

Annex 3 provides an indicative, non-exhaustive list of PKOI questions corresponding to the identified risks and objectives/activities in various protection actions conducted by DG ECHO partners.

The dignity dimension of the PKOI

We propose to focus on the safety dimension, rather than explicitly incorporating the dignity dimension in the PKOI. We hold the view that the feeling of safety incorporates the sense of dignity because there can be no real safety outcome without a certain sense of dignity. With the help of the proposed follow-up questions (see later), PKOI surveys facilitate the detection of a possible misalignment between a safety outcome and an inappropriate sense of dignity. Partners are free to incorporate ad hoc questions to collect information regarding the feeling of dignity, especially in certain scenarios where it can be more relevant (such as in reclusion centres for asylum-seekers, for instance).

Complementarily, the dignity dimension is explicitly incorporated into the Protection Mainstreaming Key Outcome Indicator (PMKOI), referring to how partners make sure that beneficiaries' dignity is respected during the implementation of the action.

Altogether, we pose that the measurement of feelings of safety (with dignity) at the end of the protection action (through the PKOI), and the continuous monitoring of safety with dignity during the implementation of the action (through the PMKOI) provide a comprehensive indication about how beneficiaries' safety with dignity is impacted.

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5 – BUILDING THE SURVEY QUESTIONS FOR THE PKOI

Partners can build their own survey questions to collect information about the PKOI baseline and end-line, to introduce a high level of contextualisation and factor in the variety of planned and implemented activities. Partners can use one or several survey questions to measure the PKOI.

Allow us to explore a pathway of building a baseline and an end-line questionnaire:

Baseline questionnaire

In order to build the PKOI baseline question(s), partners should include the contextualised safety (with dignity) variable in the question(s). For example:

“How safe do you feel regarding the identified X and Y protection risks affecting the safety in the community”?

“How safe do you feel when you must leave your house and go to the market / when you must work in the fields/fetch water and firewood/?”

End-line questionnaire

In order to build the PKOI end-line question(s), partners **should add the attribution component (or question)** to the variable of contextualised safety:

[contextualised **safety** (with dignity)] + **[attribution]** to partners' action]

Attribution allows to establish a direct link between the feeling of safety (with dignity) and the objectives, as well as the activities, of the action. There can be different ways to cope with attribution, as per the examples below.

Strong attribution, by using a specific reference to the action:

“We have implemented the activities X and Y in the project [attribution]. How have these activities impacted your feeling of safety (with dignity)? [contextualised safety].”

“How safe do you feel regarding the X (protection risk that was identified) [contextualised safety] and which this project deals with?” [attribution].

“How safe do you feel now thanks to the project? Please let us know which activities make you feel safer (and more dignified)?”

(In this case, if the interviewee cannot remember a particular activity, the interviewer can prompt him/her. If the interviewee fails to name/recognise any activity, the answer should be recorded as “I do not know” even if the initial answer was positive, e.g.: “I feel safer”).

Weak attribution, by using just a generic reference to the action:

¹ https://civil-protection-humanitarian-aid.ec.europa.eu/resources-campaigns/policy-guidelines_en

“How has this project impacted your current feeling of safety (with dignity) / in how safe you feel now?”

Please note that:

- Biased, inducing questions should be avoided; for example, “Do you feel safer thanks to this project?”
- Rather than broad questions around whether an individual “feels safe” or not, it will be more useful to ask questions about the contextually relevant activities that are affected by safety concerns and that have been addressed through the action (such as going to fetch water, to the market, to visit relatives, etc.).

Attribution...and contribution

Safety (with dignity) is a complex outcome that may require different interventions, while a partner's given action might address only one or two of those required interventions. Therefore, instead of focusing exclusively on attribution, one may discuss/shed light on the contribution of an action towards the beneficiaries' perception of safety, i.e., how that action has contributed to increasing the feeling of safety, while other factors may remain out of reach of the partner's action.

For example, internally displaced persons (IDPs) belonging to a discriminated social minority can be afraid of moving around because they might be mistreated or abused by the police. However, retrieving their lost ID cards may contribute to them feeling safer when they must go to the market or on other necessary errands (even if certain level of mistreatment persists).

Survey answers

Once the PKOI questions are defined for the baseline and end-line surveys, partners will use a Likert scale to order the answers:

I feel much safer / I feel somewhat safer / I do not feel any safer² / I feel less safe / I feel much more unsafe

I don't know – decline to answer

If the answer is a “less safe” or “much more unsafe”, a follow-up question is expected. For example:

“Would you mind telling us why you do not feel safer after the implementation of this project?”

Follow-up questions are very important because they provide information about emerging contextual events or unintended results of the action, as explained below.

A lower feeling or perception of safety than in the baseline can generally be attributed to two reasons:

- a) Emerging context-specific events jeopardise the safety with dignity of beneficiaries, outside the direct control of the partner's action. Partners must assess the situation carefully and take appropriate measures (if the need arises).

For example, in an action tackling the restricted freedom of movement in several communities, unexpected advances in the position of an armed actor may have silently increased their forced recruitment activities among boys and girls in those communities, thereby hindering their feeling of safety, despite the protection action implemented.

- b) The outcomes of the action themselves are perceived by beneficiaries to negatively affect their safety, or the outcomes of the action somehow endanger some or all beneficiaries because of having chosen a wrong protection objective.

For example, an action targeting internally displaced persons (IDPs) in a specific area aims to register them, allowing them to access government-provided support. However, during mid-term monitoring for the interim report, several beneficiaries responded negatively when asked if they felt safer because of this action. They expressed fear that their safety had worsened because they believed the government now had their names and might target them. In other words, they felt that their safety situation had worsened due to the outcome of the action.

Obviously, potential negative consequences arising out of the action itself should be considered before initiating such an action in the first place as part of avoid doing harm.

Both situations could have been identified during a PKOI monitoring activity³, but it is more likely that they would have been detected during the more frequent monitoring of the PM KOI⁴. In both cases, immediate measures are required, and lessons

² Or “I worry the same about my safety”

³ Intended for the Interim Report, as in the example provided.

⁴ Both the PM KOI and the PKOI measure different things, as explained elsewhere in this Guidance. But the beneficiaries' perception of safety may cut across both indicators (at the level of safety outcomes, for the PKOI, and about safety during the implementation of the action, for the

learnt must be considered if there is a continuation of the action.

With the aim of identifying a context-appropriate measure of the PKOI, partners may use one or more questions for measuring such, thereby allowing for a broader understanding of challenges faced by beneficiaries.

PKOI questions and approaches that are not recommended

The use of binary questions

The use of binary questions, i.e., allowing for a binary response (yes/no) about the feeling of safety, is strongly discouraged because those do not adequately reflect the broader range of possible beneficiaries' feelings in relation to safety (with dignity).

Asking broad questions about safety for measuring the PKOI

It is not recommended to ask broad questions for measuring the PKOI: Broad questions might not specifically reflect what is being evaluated (namely, whether there is a heightened feeling of safety (with dignity) among the targeted population due to / as a result of the implementation of the action).

Some real examples (as used by partners):

“How are the relations among the different groups existing in your community?” or, “What is the nature of the conflicts existing in your community?”

“Are there police officers or civilian vigilance committees that patrol your community?”

If the action is intended to tackle/address conflicts, thefts or violence in the community, the answers to the questions above will enrich the risk analysis yet may not have immediately relevance for measuring the PKOI.

Asking about “feeling safe”, or “feeling safer”?

Safety is not a singular, isolated concept but rather a multifaceted and interdependent outcome, an amalgamation of numerous factors, conditions, and elements working together to create a particular situation. Safety is heavily context-dependent, and what is deemed safe in one situation may not hold in another setting or over time. Similarly, striving for safety sometimes involves trade-offs: When individuals seek to feel secure, they may find themselves compelled to forgo some of their everyday needs, even if it harms them in other respects.

This understanding of safety underscores the fact that, if beneficiaries face several risks, a single action may fail to instil a complete sense of safety in them yet may bolster their feeling of safety (with dignity)⁵. Given that beneficiaries may not perceive an all-encompassing sense of safety, formulations of questions such as “do you feel safe” are best avoided and rather favour formulations such as “Feeling safer now”, or “How safe do you feel as compared to...”.

Baseline and target values

The PKOI is an outcome indicator, which means that it measures the difference between the value at the beginning (baseline) and at the end of the action (target).

The PKOI requires a solid baseline around questions best qualifying safety (with dignity) in a particular context. Such a baseline must be established before or at the start of the intervention. When an action is a follow-up of a previous action where the PKOI was already used and an end-line survey conducted, it is possible to use the achieved action's value as a baseline value for the upcoming action, provided no major changes have occurred.

If there were no previous similar actions in the same context, the target value can be defined by the partner (an explanation of the chosen target value is expected of partners).

Source and method of data collection for the PKOI

DG ECHO does not expect partners to establish a separate M&E process specifically dedicated to measuring protection with the PKOI: The measurement of the PKOI should be embedded within existing M&E processes to the extent possible.

Measuring the PKOI baseline and end-line require the application of a survey, as these cannot be measured with FGD or other qualitative methods.

PMKOl). In any case, the PMKOl is measured more regularly during the implementation of the action.

⁵ This understanding is also in line with the instructions regarding the Specific Objective in the Single Form Guidelines, point 7.1.2: “The Specific objective is what the partner intends to achieve by implementing the Action. It should address the core problems or some of them as identified in the findings of the problem, needs and risk analysis in accordance with the strategy outlined in the response analysis”.

The sample population should be taken from direct beneficiaries of the action only; it does not require a statistical sample of the total population living in the targeted area.

Partners should ensure that the sample of beneficiaries selected for the measurement adequately represents all community subgroups (at least in terms of gender, age and disability; others, like community minorities, may be considered too).

Nevertheless, DG ECHO recognises that the measurement of protection at the outcome level is still an unfolding field, and more research and systematisation are needed to fully consolidate this indicator. Due to this reason, several sources of information for the PKOI are suggested (to be reviewed in the future).

Surveys

A survey is the preferred method to measure the PKOI, due to its capacity to provide evidence about beneficiaries' perception of safety (with dignity) as a result of the implementation of the action.

DG ECHO has developed a specific survey tool for aggregating the survey responses and calculating the PKOI. See further details at https://civil-protection-humanitarian-aid.ec.europa.eu/resources-campaigns/policy-guidelines_en

The gold standard, statistically speaking, is the accuracy provided by stratified probabilistic sampling with a 95% confidence level and a 5% margin of error. This "95/5" rule determines the sample size required for the survey⁶.

If a partner faces clear constraints regarding the size of the sample (number of beneficiaries to be interviewed) or the sampling process (how beneficiaries are selected), the following options might be considered:

- The size of the sample can be reduced by using a 95% confidence level but a margin of error of 10%. Please bear in mind that in this case, statistically accurate analysis at the subgroup level (sex, age, etc.) may no longer be possible, as explained in the next paragraph.
- The required stratification (at least sex, age and disability groups) increases the size of the sample, which might be operationally challenging.
- However, partners should verify the actual margin of error for each sex/age/disability/ diversity population group. Whenever the margin of error for a subgroup is higher than 10% (which may be problematic to ensure a statistically accurate analysis for this subgroup), completing the sample with a non-probability sampling technique⁷ (e.g., quota sampling, purposive sampling, etc.) is to be further explored.

Please note that lowering the confidence level and/or increasing the margin of error means that the survey results will be less precise and may not be representative of the beneficiary population. For this reason, **partners are expected to report the specific constraints they are facing⁸, and the details of the sampling method, level of confidence and margin of error applied to obtain the PKOI results.**

(See Annex 2 for an example of sampling and margins of error verification).

Administration of the surveys

The survey will preferably be administered through **one-on-one interviews**, either using a paper or an electronic version on a handheld device (in some cases a self-completion survey might be used). Enumerators should be diverse and have received adequate training. Ideally, the enumerators using the survey tool will not be the day-to-day contact points during the implementation of the action. This will help limit reporting bias and may enable respondents to display more openness in the answers they provide.

Other data collection methods for the PKOI

As explained above, surveys are the preferred method for measuring the PKOI. However, if a partner faces specific constraints for applying a survey, other methods may be used (it is expected that partners explain and justify why a survey is not applied in a given case).

Intake and exit interviews (case management actions only)

In some case management actions, *as an alternative to the PKOI*, it may be possible to utilise intake and exit interviews to collect data for verifying a custom indicator at the outcome level. At the time of drafting this Guidance document, this possibility is being deliberated.

⁶Calculations can be made using tools like <https://www.surveymonkey.com/mp/sample-size-calculator/> or <https://www.checkmarket.com/sample-size-calculator/> for instance.

⁷Non-probability sampling is defined as a sampling technique in which the researcher selects samples based on the subjective judgment of the researcher rather than random selection.

⁸E.g. lack of access due to security risks or hazards.

(All standard methods to reduce the bias inherent to these interviews should be applied and reported. In many cases it may be appropriate for protection staff to conduct the evaluation, due to confidentiality reasons.⁹⁾

Focus group discussions (FGD)

Focus group discussions (or other qualitative data-gathering alternatives) cannot be used as a means of verification for the PKOI, because not allow for numerical results for the PKOI. They might be used for providing complementary information¹⁰ when no surveys can be applied. The summarised information can be added to the Final Report

in a way that conveys an overall understanding of the beneficiaries' perceptions while distinguishing between the different perceptions of subgroups (according at least to gender, age and disabilities).

Partners are also expected to provide details about the number and localisation of FGD; how they have ensured the participation of a diversity of beneficiaries; and how they have collected and analysed the information stemming from the FGD to get to the reported conclusions.

About other methods for collecting data

Alternative methods such as Low-Quality Assurance Sampling, Q-sorting, Story Completion and Rapid Ethnographic Studies, like ECRIS¹¹, might be used for data collection. It is expected that partners explain why and how they will be using methods other than surveys.

PDM (Post Distribution Monitoring) surveys are not considered adequate as the information collected is mainly related to safe and dignified access to services and distributions (such as solar lamps, cash etc.), which is relevant only to measuring protection mainstreaming through the PMKOI.

6 – Summary: The PKOI in the e-single form

The table below provides details on how to report PKOI in the e-single form, upon submission and at the interim and final reports.

<p>4.2.3 Specific objective - Indicators</p> <p><i>Indicators at specific objective level measure the main outcomes of the action</i></p> <p>4.2.3.1 Specific objective indicator (pre-defined Protection KOI)</p> <p>% of persons/target population (in a given context) reporting an improved feeling of safety (with dignity) (by the end of the intervention compared to at the beginning).</p> <p><i>Note: The partner can choose between the pre-defined KOI or (as a last resort), a custom indicator. If a custom indicator is selected, the partner must provide a (short) indicator name. When a custom indicator (manually entered) is chosen, the partner needs to be specific about what is going to be measured.</i></p>
<p>Description</p> <p>Safety (with dignity) must be contextualised and qualified in each context based on the elements identified in the risk analysis and on the specific objectives of the action.</p>
<p>Baseline</p> <p><u>Whenever possible</u> PKOI baseline data should be available before the action starts as part of the risk analysis / needs assessment¹². % and absolute values should be used for both baseline and target measurements.</p>

⁹Proper confidentiality, a secure closure, and effective data management are essential, particularly when dealing with sensitive data, as is the case with survivors of sexual violence.

¹⁰ Partners are free to use FGD to provide complementary information, in addition to surveys.

¹¹ ECRIS is the acronym for Enquête Collective Rapide d'Identification des conflits et des groupes

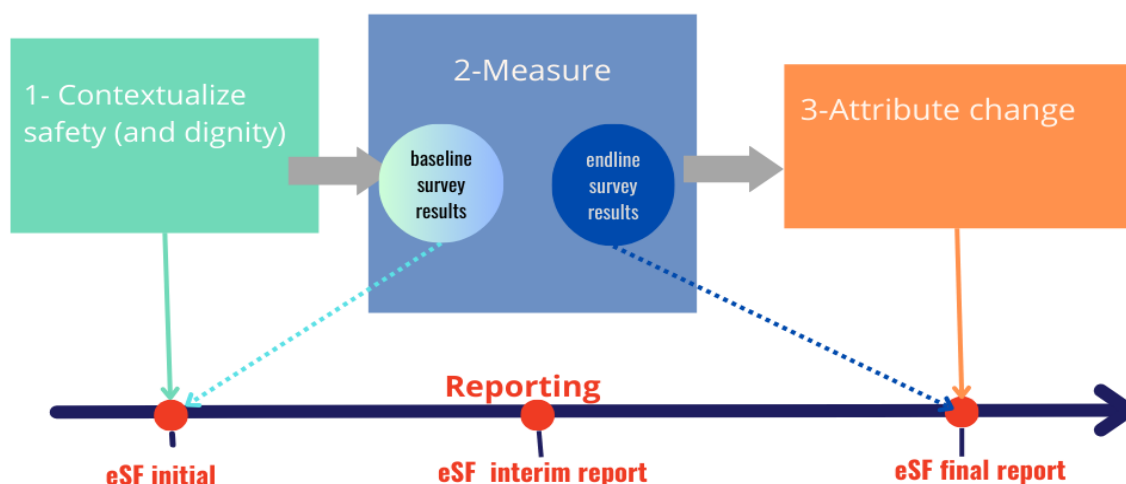
¹² Exceptionally, no baseline may be accepted for new actions. This will be discussed on a case-by-case basis with the DG ECHO country office.

<p>Target value</p> <p>The partner will indicate the % and absolute values of the population reporting a heightened feeling of safety (target) it intends to reach by the end of the action.</p>
<p>Progress value</p> <p>At the interim report stage, the partner will indicate the progress value (in % and absolute values).</p>
<p>Achieved value</p> <p>At the final report stage, the partner will provide the achieved value (in % and absolute values).</p>
<p>Source and method of data collection</p> <p>A survey is the preferred method to measure the PKOI. The sample population should be taken from direct beneficiaries of the action only. A survey tool is available in the guidance. FGD and other qualitative sources of data collection cannot measure the PKOI but may provide complementary information.</p> <p>In case management actions case management interviews might be used as a custom indicator (instead of the PKOI, see the text for further details)</p>
<p>Comments on the indicator</p> <p>The partner should provide disaggregated information by age and sex at proposal stage (if available), as well as additional information on the process of measuring the indicator, including details on the contextualisation of safety and attribution of results.</p>
<p>[INT] Progress report on indicator</p> <p>The partner will provide an overall update on progress made towards the achievement of the specific objective, and if necessary, mention difficulties in data collection. Disaggregated information by age, sex and disability should also be provided here.</p>
<p>[FIN] Progress report on indicator</p> <p>The partner will report on the level of achievement and attribution of the Specific objective providing additional information and context that the indicator might not have been able to capture (such as the responses to the follow-up questions during the surveys). The partner should explain why targets have not been met or surpassed (if that is the case), and what kind of difficulties, of any, were encountered in the data collection process. If a survey has not been used, the results of FGD or other qualitative methods can be included here. Disaggregated information by age, sex and disability should also be provided here.</p>

Chart showing the Implementation of the PKOI, with the main steps and the reporting process

Protection KOI

"% of persons/target population in a given context reporting an improved feeling of safety and dignity by the end of the intervention compared to at the beginning"



7 - Important clarification: the differences between the PKOI and the PMKOI


The Protection Mainstreaming KOI (PM KOI) and the Protection KOI (PKOI) are two different indicators that measure protection in two different ways, and this can lead to confusion between them:

- The PKOI measures a protection outcome as a result of a stand-alone or integrated protection action, at the end of the action.
- The PM KOI monitors how protection is mainstreamed during the implementation of an action across all humanitarian sectors.

It is not uncommon to confuse the measurement and reporting of both indicators. Please find some troubleshooting tips below.


Common mistakes:


The most common mistakes to avoid are related to reporting on the PKOI while including elements of protection mainstreaming (PM KOI):

-  Combining PM KOI questions and PKOI questions and aggregating their results for reporting.

It is not correct to add up the responses to a questionnaire that combines PM KOI and PKOI questions, like:

- A PM KOI question about the safety and dignity of beneficiaries when accessing the assistance provided by the partner (e.g., a PM KOI question for PDM)
- A PKOI question about the beneficiaries' feeling of safety as a direct result of the action (a PKOI question for the end-line evaluation: for example, the feeling of safety *after* obtaining necessary legal documents).

-  How the error could be avoided:
- ◆ Separate PKOI and PM KOI questionnaires
 - ◆ If a partner prefers to combine the PM KOI and PKOI questions in a single questionnaire (for an end-line survey, for example), ensure that the responses to the different questions are aggregated separately to allow independent reporting on each indicator.

-  Report on the PKOI using PM KOI questions and data.

Sometimes partners report on the PKOI using the surveys used to measure the PM KOI.



How to avoid this mistake:

- ◆ When measuring the PKOI, stick to PKOI questions and avoid including questions related to the PM KOI (remember that they are two different indicators!).

The table below summarises the main differences between the two indicators:

Protection Mainstreaming Key Outcome Indicator (PMKOI)	Protection Key Outcome Indicator (PKOI)
It monitors whether humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner.	It measures the improvement in beneficiaries' feeling of safety (with dignity) as a result of a protection action (either a stand-alone or an integrated protection action).
It is a <u>process</u> indicator to monitor and trigger the implementation of corrective actions/measures (where needed) across all actions and sectors. (WASH, Health, Shelter, Protection etc...)	It is an <u>outcome</u> indicator, measuring protection actions at the outcome level (end-line).
Recommended for ALL actions providing direct assistance and services to populations, regardless of the sector(s) of intervention.	Recommended for DG ECHO-funded actions that include at least one <u>protection</u> sector result (except if focus is solely on advocacy)
Example: Monitoring of beneficiaries' safe and dignified access to assistance activities, inclusion, participation, accountability, etc. during the implementation of the action.	Example: Measures beneficiaries' feeling of safety (with dignity) when carrying out contextually relevant activities affected by safety (with dignity) concerns, such as fetching water, going to the market, visiting relatives, accessing documents, reintegrating separated minors, reducing the number of assaults, etc.
PMKOI Guidance note: https://civil-protection-humanitarian-aid.ec.europa.eu/resources-campaigns/policy-guidelines_en	PKOI Guidance note: https://civil-protection-humanitarian-aid.ec.europa.eu/resources-campaigns/policy-guidelines_en

Annex 1– Frequently Asked Questions

Why do we need a Protection Key Outcome Indicator (PKOI)?

DG ECHO requires all funded operations to be based on a well-developed intervention logic, which defines the objectives to be achieved, the activities to be undertaken to achieve these objectives and the logical relation and intermediary steps between them. Indicators are used to measure outputs and outcomes in an objective manner. Given the growth of the protection sector, a PKOI protection indicator is crucial for assessing the effectiveness of a protection action at the outcome level.

Is it mandatory to do a risk analysis?

DG ECHO asks partners to “provide a comprehensive risk analysis that reflects the threats, hazards, vulnerabilities, and capacities for different age, sex, and disability groups, as well as contextually relevant social, ethnic, religious and other diversity groups”. The risk analysis is crucial for measuring the PKOI, because “the concept of safety (with dignity) should be contextualised and qualified in each context based on the element identified in the risk analysis”.

My organisation has already developed tools to measure protection at the outcome level. Are we obliged to use the DG ECHO PKOI?

No. Partners are free to use other tools to measure protection at the outcome level, but DG ECHO does expect reporting at the outcome level as if you were using the DG ECHO PKOI. At the current stage of evidence regarding protection outcomes, reporting about beneficiaries’ feelings or perceptions about their safety (with dignity) is one of the most advanced standards.

Is it mandatory to do baseline and end-line?

The PKOI is an outcome indicator, which means that it measures the difference between the value at the beginning (baseline) and at the end of the action (target). Baselines for indicators are indispensable to monitor progress during the intervention and achievements at the end. Exceptionally, no baseline may be accepted for new actions. These cases will be discussed on a case-by-case basis with the DG ECHO country office.

How do we measure the PKOI in case management actions?

In some case management actions, as an alternative to the PKOI, it may be possible to utilise intake and exit interviews to collect data for verifying a custom indicator at the outcome level. At the time of drafting this guidance document, this possibility is being deliberated.

How to contextualise safety (with dignity)?

Risk analysis allows for the contextualisation and definition of safety within a specific context, as well as the identification of a set of variables to measure it. These variables or proxies are used to formulate questions for the baseline and end-line surveys. For example, questions may pertain to the feeling of safety when going to a place of interest for the beneficiaries or accessing public services outside their community.

Are we measuring whether beneficiaries feel safe or whether they feel safer?

In a humanitarian context, people may not feel safe for various reasons. However, after an intervention, they may feel safer than before if the action addresses some of their primary perceived risks. Therefore, the PKOI aims to measure if people feel safer, specifically if there is an increased sense of safety (with dignity). Nonetheless, individuals might still feel unsafe due to other (hopefully less significant) reasons.

Assessing the feeling of safety when conflicting priorities exist

Assessing the feeling of safety when conflicting priorities exist can be complex. In some situations, affected individuals may not prioritise specific protection needs, such as obtaining personal documentation. Measuring the perception of safety with the PKOI in these cases may be challenging, necessitating a thorough risk analysis with extensive stakeholder participation before designing the intervention.

Could we use yes/no (binary) questions regarding the feelings of safety with dignity?

On their own, binary questions (allowing a yes/no response) provide little information for the indicator and do not follow the instructions about the measurement of the PKOI. They are not recommended.

Shall we conduct specific surveys for the PKOI?

No, it is not necessary. The tool has been conceived to maximise its incorporation into existing M&E tools. However, data needs to be extrapolated and analysed separately to be able to report on protection outcomes.

Can we use the same questions to measure the Protection Mainstreaming Key Outcome Indicator (PMKOI) and the Protection Outcome Indicator (PKOI)?

No, because they are two different indicators: The PMKOI is oriented towards monitoring the implementation of an action, while the

PKOI intends to measure the outcome of the action. In any case, PKOI-collected data needs to be analysed separately to report on protection outcomes.

Can we use a custom indicator to measure protection at the outcome level?

Yes, partners can use an alternative indicator. Nevertheless, it is important to discuss it with DG ECHO TAs or POs/PAs of the country office on a case-by-case basis, so that the spirit of the PKOI is not lost and an appropriate verification method can be identified.

Is the PKOI applicable to all types of actions?

The PKOI might not always be applicable in the following actions: a) RRM and ERM actions, b) actions of very short duration, and c) in highly volatile environments. In those situations, the applicability should be discussed on a case-by-case basis. If the PKOI is applied in a prevention action, attribution should be reinforced by all means, to make sure that there is a reasonable cause-effect link between the preventive activities implemented and the expected avoidance of unsafe situations for the beneficiaries.

Is it necessary to interview the same individuals for the baseline and the end-line surveys?

No, it is not necessary. If you follow appropriate statistical requirements, you do not necessarily need to interview the same individuals for baseline and end-line surveys on feelings of safety, because random sampling and statistical techniques can account for changes and trends within the target population over time.

Why not use well-being instead of dignity in the formulation of the PKOI?

The term dignity seems more usable and fit for the purpose than well-being when measuring the PKOI. Still, the term well-being might be used in some instances and contexts as part of a custom indicator when duly justified.

Annex 2 – Hands-on: How to calculate the PKOI (example)

The PKOI Excel tool kit provides a template to calculate the indicator, as in the example below.

First step: Sampling and disaggregating data

For example, let's assume that a partner implements a stand-alone protection action targeting 20,000 direct beneficiaries. The action is aimed at targeting the general population rather than focusing on a specific sub-group (e.g., children, women, etc.).

Among the 18,600 direct beneficiaries above 5 years old, 377 individuals need to be included in each survey round to respect the 95/5 rule (see the far-right white cell in the table below) (alternatively, just 96 beneficiaries would be necessary in case of operational constraints regarding the survey application, if the 95/10 rule was to be applied).

Random sampling will lead to the identification of the following number of people for each population sub-group. The related margin of error has been verified for all of them to identify the limitations with an analysis at the subgroup level:

	Female				Male				Potential additional diversity groups		Subtotals						Total
	5-17 y.	18-49 y.	50 y. and more	Living with disability	5-17 y.	18-49 y.	50 y. and more	Living with disability	Diversity group A	Diversity group B	Total female	Total male	Total 5-17 y.	Total 18-49 y.	Total 50 y. and more	Total people living with disability	
Sample size	61	122	12	27	65	109	8	30	200	67	195	182	126	231	20	57	377
Actual margin of error (in %)	12%	9%	29%	19%	12%	9%	35%	18%	7%	12%	7%	7%	9%	6%	22%	13%	5%

The dark orange cells highlight a margin of error above 10%, which may be problematic in ensuring a statistically accurate analysis for that subgroup, and for which partners may consider increasing or completing the sample with non-probability sampling techniques (e.g., quota sampling, purposive sampling, etc.).

Second step: Calculating the PKOI value

Any PKOI question allows for one single answer, as per the Excel toolkit provided. To calculate the indicator, please follow the steps below:

1. Remove all "NO ANSWER" responses from the analysis (i.e., exclude them from the denominator).
2. Sum up the number of respondents who chose "MUCH SAFER" and "SOMEWHAT SAFER" for every question (if more than one). The number of negative responses can be calculated by a simple subtraction.
3. Calculate the average percentage for the questions to get the final PKOI result.

Example:

Looking at column C in the table (Female respondents, 18-49 years), a sample size of 122 allowed a margin of error of 9% (with a confidence level of 95%). Two women declined to answer so the denominator was reduced to 120. The 85 positive responses yield a value of 71% for the PKOI for this particular subgroup of the population.

DG ECHO PKOI calculation tool								
	Female				Male			
	5-17 years	18-49 years	50 years and more	Living with disability	5-17 years	18-49 years	50 years and more	Living with disability
Sample size	61	122	12	27	65	109	8	30

Margin of error (real)	12%	9%	29%	19%	12%	9%	35%	18%
Question 1								
I feel much safer	35	85	8	14	40	60	4	16
I feel somewhat safer	14	23	1	9	13	38	2	10
I do not feel any safer / I do not know	5	12	2	3	7	7	1	4
Decline to answer	7	2	1	1	5	4	1	0
Total positive / denominator	65%	71%	73%	54%	67%	57%	57%	53%
	61	122	12	27	65	109	8	30

Note that if there are two or more PKOI questions regarding different variables or situations (for example, the feeling of safety in a given area and the feeling of safety when beneficiaries claim their assistance from the government), it will be important to keep both values. This is because they refer to two different situations, even if both values are ultimately averaged for the PKOI.

Annex 3 – A non-exhaustive list of possible PKOI variables and questions, as used by DG ECHO partners

This is a non-exhaustive list of PKOI variables and questions as per the identified risks and objective of an action; most of these questions come from actual actions by DG ECHO partners.

Please note that these categories overlap to a certain extent: You can choose and adapt the questions that best reflect your action and activities, as per the identified risks.

Details of risks to be tackled: Being afraid of / fear due to (to be contextualised):		Possible protection objectives (based on the protection variable, as per the column to the left)	PKOI end-line questions (examples) “After the activities X and Y of this project..., how safe do you feel now when...”
Freedom of movement and safe locations	Fetching firewood or water	-Contribute to preventing/tackling aggressions during... -Provide alternative/safe means for cooking and access to water	... fetching water in....?
	Going to the market, or visiting relatives (or other movements)	-Contribute to heightening safety in specific paths or places	... going to the market? ... carrying out your daily activities?
	Moving around in a given area (a camp, for example), or going to certain areas	-Contribute to heightening safety on specific paths or places -Provide alternative services if adequate (to reduce exposure to the risks) -Community-based protection mechanisms	...returning home at night? ...travelling to the fields? ...walking around your community?
	Going to be attended in an existing public service facility (health service or others)	-Contribute to heightening safety on specific paths or places -Provide alternative services if adequate (to reduce exposure to the risks) -Community-based protection mechanisms	...travelling to the hospital?
	Staying at home (being in an exposed area, for example) or in specific places	-Contribute to heightening safety on specific paths or places -Provide safe spaces for children and women and girls and boys or other groups considered to be at specific risks in the context	...staying at home during the day?

	Children abuses at home or at school/learning spaces	<ul style="list-style-type: none"> -Make sure that schools/learning spaces are safe for children, the same as their homes -Strengthen community-based child and boys' and girls' protection mechanisms 	...attending school...?
Risks related to lack of access to legal documents and legal knowledge	Lack of legal documents (ID, birth certificate, etc.) or legal knowledge impedes access to rights	<ul style="list-style-type: none"> -Facilitate access to the process to acquire legal documents -Provide legal advice, facilitated taking legal steps, provide legal representation -Referral to public services and other legal authorities 	<ul style="list-style-type: none"> ...carrying or using your ID card? ...claiming your assistance at the Governmental IDP centre? ...because you know what to do, whom to report if legally harassed?
Risks related to coercion or deprivation	Forced recruitment	<ul style="list-style-type: none"> -Increase engagement of minors with education and other activities -Provide safe spaces for children and women and girls and boys or other groups considered to be at specific risks in the context -Contribute to prevent the exposure of the targeted population to forced recruitment activities -Negotiation with relevant actors through community-based protection committees 	<ul style="list-style-type: none"> ...attending school? ...in the afternoons, waiting for your parents at the centre? ...not having to come across (certain actors)?
	Asked for money or exposed to bribery to get access to public services that should be free	<ul style="list-style-type: none"> -Negotiation with authorities through community-based protection committees 	...getting free access to public services?
	Exploitative labour and slave work	<ul style="list-style-type: none"> -Contribute to community-based responses to prevent this (depending on the context) -Sensitisation on rights 	...if you can claim your rights...?
Risks related to GBV and age, and trafficking of persons	Heightened intimate partner violence (IPV)	<ul style="list-style-type: none"> -Support centres for IPV survivors -Community/public education about assistance available to intimate partner violence survivors -Sensitisation against IPV 	<ul style="list-style-type: none"> ...you know whom to resort to if? ...you know where you will receive assistance or a referral?
	Sexual violence and abuse, including forced prostitution. Sexual harassment.	<ul style="list-style-type: none"> -Support centres for sexual violence survivors -Referral to critical services -Community-based protection mechanisms 	<ul style="list-style-type: none"> ...you know whom to resort to if? ...you know where you will receive assistance or a referral?

	Trafficking of persons, including women, girls and boys, and children.	<ul style="list-style-type: none"> -Support centres for victims of trafficking -Referral to critical services -Community-based protection mechanisms -Public education and to officials about trafficking 	<p>...you know whom to resort to if?</p> <p>...you know where you will receive assistance or a referral?</p> <p>...from trafficking?</p>
Risks related to negative coping strategies	Transactional sex	<ul style="list-style-type: none"> -Access to livelihoods (or cash and voucher assistance cash assistance in certain cases) -Referral to critical services 	...not having to resort to “undesired activities”?
	Child labour	<ul style="list-style-type: none"> -Access to livelihoods or cash and voucher assistance cash assistance (in certain cases) 	...not having to resort to/work as a child
	Early marriage	<ul style="list-style-type: none"> -Keeping girls in school/learning spaces -Support centres for girls and women 	...not having to resort to....?
Risks related to direct acts of violence (other than GBV)	Being targeted due to discrimination, belonging to a social minority or ethnic group, or being part of a political opposition group, etc.	<ul style="list-style-type: none"> -Facilitate access to legal documents -Provide legal advice, facilitate legal steps, provide legal representation -Provide safe spaces for those being discriminated against. -Community-based protection mechanisms -Sensitisation of majority community 	<p>...now that you have your legal documents?</p> <p>...now that you can seek support from a community committee in the event of a discrimination incident?</p>
	Theft and robbery, violent assault Being beaten or attacked for any reason	<ul style="list-style-type: none"> -Contribute to heightened safety in specific areas, places or paths. 	<p>...reporting the incident to the police or to a community committee? (or any other mechanism addressing safety in the area)</p> <p>...now that you know whom to report if attacked? (and you expect an adequate response after reporting)</p> <p>...you see a policeman/woman patrolling the area?</p>
	Conflicts, competition with the host community, refugees or IDPs that were already in the area	<ul style="list-style-type: none"> -Contribute to dialogue and conflict resolution among communities/populations -Community-based protection mechanisms 	<p>...when dealing with the host community?</p> <p>...when dealing with the refugee/IDP?</p>
	Mistreatment by authorities, including police and others, arbitrary arrest and detention, harassment, beatings, killings and disappearances	<ul style="list-style-type: none"> -Register of cases -Legal advice for access to justice and redress -Facilitate access to legal documents 	...when interacting with police and other authorities?