



Inter-Agency
Coordination
Türkiye

3RP Protection Sector

Recommendations for Scope and Content of Programming

2025 Appeals

This document aims to highlight key recommendations on the scope and content of programming for partners interested in appealing under the 3RP Protection Sector (2025). This document was prepared per the data and analysis from Round 8 Inter-Agency Protection Needs Assessment ([IAPNA R8 Dashboard](#)), the Joint 3RP Protection Sector Consultation Meeting ([English](#) and [Turkish](#)) and the Mid-Year Sector Monitoring and Evaluation Meeting ([English](#) and [Turkish](#)). This document should be read in conjunction with the **Guidance on Minimum Standards and Criteria for Protection Programming** ([English](#) and [Turkish](#)) document along with relevant national action plans¹. Please also note that the following suggestions are not written in order of importance.

Access to Information

- In addition to general information dissemination activities, it is crucial for sector partners to invest in **tailored information dissemination and awareness-raising activities**, as information needs differ across age and gender groups, location and nationality. For these activities, female headed households and women, Afghans, individuals residing in the Aegean region and in rural areas should be prioritized. As NGOs and community-based organizations ranked third as sources of information, partners should increasingly mobilize their capacities to disseminate information more widely. Information and awareness-raising activities and materials should be prepared using diversified approaches, tailored to the varying disability statuses, participation levels, and educational backgrounds of individuals while incorporating an Age, Gender, and Diversity (AGD) approach. In addition to the specific groups mentioned above, partners should also prioritize tailored outreach activities to enhance the access of LGBTIQ+ people to information about services, as these groups are usually left furthest behind in this area.
- Partners should prioritize **innovative solutions over traditional methods** to strengthen access to information. These approaches should include the use of the internet and social media, as well as the creation of accessible content utilizing artificial intelligence. These efforts should target individuals with high digital literacy and complement other more traditional methods targeting those with lower digital literacy.
- Considering community networks and refugee groups are the primary entities through which beneficiaries seek information, sector partners are encouraged to continue to strengthen and mobilize community capacities towards **disseminating information within their own social/community networks**.

¹ In addition to the national action plans listed below, relevant national strategies also include 2024-2028 Strategy Document and Action Plan on Empowerment of Women, available [here](#).



- Partners should focus on addressing information gaps related to **PDMM-specific information needs**, including registration and documentation, address registration/verification procedures and available feedback, complaints and response mechanisms.
- Considering there are unmet needs with regards to awareness and information on how to obtain civil documentation, partners are encouraged to continue to **disseminate information and raise awareness on this matter, including related data update processes** (such as birth registration, marriage registration, divorce and death certificates). Afghans, individuals residing in Central Anatolia/Black Sea region and rural populations should be prioritized for raising awareness on how to obtain civil documentation.

Accountability to Affected Populations

- Awareness raising on feedback, complaints and response mechanisms should be more widely implemented and specifically target women, Afghans, and individuals residing in the Marmara region and Southeast region, with a focus on the rural and industrial areas. While promoting these mechanisms, partners should disseminate information to communities about the processes in place for handling complaints and the interventions made in response to these complaints, as this is essential for **demonstrating their functionality and reducing hesitancy within communities to provide feedback to service providers**. In this respect, partners are encouraged to **outline measures and safeguards** to prevent retaliation and repercussions regarding feedback and complaints in their SOPs. Individuals should also be informed on these safeguards. Diversified feedback tools should be adapted to meet the needs of different groups and be accessible to all, including youth, rural communities, and refugees placed in certain institutions like Temporary Accommodation Centers and Removal Centers (RC), among others.
- Partners are encouraged to invest in improving the **quality, accessibility and availability particularly of hotlines/helplines** as these are the most commonly used channels for providing feedback and complaints across different age, gender groups, locations, and nationalities.
- While designing such mechanisms, the **social behavior change perspective** should be considered, as cultural codes can lead to the perception that providing negative feedback on services is inappropriate.

Persons with Disabilities and Older Persons

- Partners are encouraged to allocate dedicated budgets for **disability and aging-inclusive programming** in their project proposals.
- During programming, partners should engage with **key national strategic frameworks** including [National Action Plan on the Rights of Persons with Disabilities](#), [2030 Barrier-Free Vision Document](#) and [Vision Document on Ageing](#).



- Given the highest prevalence of disability is among men, Afghans, individuals residing in Central Anatolia/Black Sea regions, and in urban areas, targeted programming for disability inclusion should primarily focus on these groups.
- Considering the relatively low levels of access to disability reports among persons with disabilities, partners are encouraged to **enhance awareness-raising and information dissemination efforts targeting both persons with disabilities and their caregivers**. To address the lack of information on how and where to obtain a report, women, Syrians, and individuals residing in the Southeast region and in rural areas should be prioritized for targeting. For those unaware that they need a report, men, Syrians, and individuals residing in the Aegean region and in rural areas should be the primary focus. Efforts to raise awareness on disability reports should specifically emphasize the importance of obtaining these reports and focus on the rights and services that the targeted groups are entitled to once a report is obtained. Additionally, given the varying practices in providing reports, partners should engage in **advocacy with service providers to address information gaps within public institutions responsible for issuing disability reports**.
- Given that **persons with disabilities and older persons** are among the most vulnerable and neglected groups, tailored arrangements should be made to ensure their **inclusion in emergency preparedness interventions**. Targeted programming in this regard should be developed in cooperation with public institutions, organizations of persons with disabilities, older persons associations and other relevant stakeholders.
- **Tailored interventions for integrating persons with disabilities and older persons into protection mainstreaming** are crucial, considering that various groups (e.g., older women, older persons with disabilities, and older persons who are caregivers) face different challenges. Additionally, for older persons, it is crucial to implement interventions that include monitoring community-level activities, addressing intersectional issues, enhancing sector capacity, improving data availability (including disability prevalence), and raising awareness.

Social Cohesion

- During the programming of social cohesion activities, partners should also consider and benefit from PMM's Harmonization Strategy Document and National Action Plan that is currently being revised for 2025 onwards. Additionally, it will be important to utilize the [social cohesion toolkit](#) developed by INGEV through UNHCR Inter-Agency Coordination Unit, which includes practical recommendations to practitioners on the **effective design and monitoring of social cohesion interventions in Türkiye**.
- Partners are encouraged to enhance **neighbourhood-focused initiatives** and create meeting spaces within communities to foster long-term solutions. Additionally, partners are encouraged to engage in activities such as conflict-free communication and consider embedding social cohesion supportive strategies into programmes targeted at caregivers (e.g. positive parenting and early childhood development), skills (e.g. child and adolescent empowerment and MHPSS), empowerment of community structures (e.g. through community committees, etc).



- Partners should also focus on increasing **interaction with various public institutions and local authorities**, such as municipalities, the Ministry of Youth and Sports, and the Presidency of Religious Affairs, while planning social cohesion activities. Additionally, utilizing already existing gatherings, such as Quran courses, to provide information or conduct short activities related to social cohesion activities could also be effective.

Access to Protection Services

- During programming, partners should engage with **key national strategic frameworks** including [Civil Society Vision Document II. Action Plan \(2025-27\)](#).
- There is a continued need for strengthened **outreach to persons pending registration and documentation**, including through collaboration with non-protection partners and inter-agency referrals, to facilitate their access to registration, other asylum procedures and relevant rights and services.
- Police, family members/relatives, and I/NGOs were identified as the primary support mechanisms of refugees. Consequently, sector partners should **enhance their collaboration with the police**, considering that it is the most frequently approached support mechanism for individuals with protection or community concerns. Moreover, sector partners should prioritize working with community networks (considering that this is among the top support mechanisms) to mobilize self-protection capacities.
- Partners are encouraged to design **tailored programs that address the specific needs of different groups**, as these needs vary across communities. For example, this could include developing online programs for women who are unable to leave their homes due to caregiving roles and household responsibilities or creating programs that help different refugee groups (e.g., Afghans) express themselves more effectively without language barriers.
- With the increase in individuals unable to access health services, partners should implement **tailored approaches** to address these challenges. Advocacy efforts should focus on engaging with PDMM regarding the deactivation of health insurance after the one-year period following registration, which is a primary barrier to accessing health services. Additionally, **targeted information dissemination and assistance including through provision of interpreters during medical checks/visits and support in booking appointments** should be provided, taking into account that these are among the main obstacles to accessing health services.
- Considering the increase in **alcohol and substance use within communities**, partners should enhance their capacity in this area and develop **targeted, long-term, cross-sectoral programming** (considering the health, MHPSS, child protection/family welfare support components of such a response). While developing such programmes, partners should primarily target youth, men, adolescents and most vulnerable groups such as LGBTIQ+ people, as these are the main groups identified using alcohol and substance. Example of interventions which could be supported include, life skills development programmes for adolescents to reduce risks of exposure, early identification and safe referrals mechanisms to timely connect individuals with relevant support services; parenting programmes, strengthening parenting practices to create safe and supportive environments for children.



- Partners are encouraged to apply **tailored approaches and interventions to enhance the capacity of public service providers** (e.g. health services, municipalities, mukhtars, legal services, civil registry offices, centers providing social services, including women’s shelters, social service centers, and child protection service providers) **for ongoing inclusion of refugees into the national systems and services**. This is crucial, considering that challenges such as difficulty in booking appointments, lack of operational capacity and financial barriers, service providers attitudes and social norms are among the serious challenges in accessing and meaningfully benefitting from services.
- All protection programmes should aim to **support the implementation of protection services per national legislation** (including through referrals to relevant national services), if necessary, supplement it, however, should not aim to replace it in its design and implementation.
- As one of the **most vulnerable and invisible groups in Türkiye, Dom/Abdals and Roma populations** (including women, children, persons with disabilities and older persons) should be specifically targeted for improved access to rights and services. They face significant protection risks, such as limited access to social security, unequal wages, restricted job opportunities, and strong reliance on informal and seasonal work. Additionally, reluctance to interact with authorities due to discrimination and lack of awareness about their rights and entitlements causes challenges in access to services and legal support. Challenges related to education for Dom/Abdals/Roma populations include low literacy rates, high dropout rates due to economic hardship, and discrimination from peers and teachers. Frequent relocation for seasonal work also prevents their engagement with the education system in Türkiye. Overcrowded living conditions also increase privacy and protection risks, especially for children. Women and girls in these communities face risks like child, early and forced marriage and lack of civil marriage. Therefore, tailored interventions are needed to enhance their access to information, employment, social welfare, legal aid, education, healthcare, and other essential services.

Access to Legal Assistance/Aid

- As legal issues become more complex and the need for legal assistance grows, partners are encouraged to adopt **tailored approaches to increase their capacity to provide legal assistance and facilitate access to legal aid**. Women, Iranians, LGBTIQ+ people, individuals residing in the Aegean region and in urban areas should be prioritized in targeting for legal assistance. Additionally, since **I/NGOs remain the primary support mechanism for receiving legal assistance**, and individuals tend to seek support mainly from these organizations due to deportation concerns and reluctance to approach public institutions, partners are encouraged to increase their capacities in this area.

Protection of Children, Adolescents and Youth & Access to Education

- During programming, partners should engage with **key national strategic frameworks** including [2023-2028 Türkiye Child Rights Strategy Document and Action Plan](#).
- Partners should strive to cover in their appeals documented **emerging child protection concerns/deliberately target particularly vulnerable groups of children/adolescents**.



These groups include unaccompanied and/or separated children/children on the move, children and their families whom are pending registration and documentation with PMM, children lacking birth certificates, children with disabilities and their caregivers, children working/begging in the streets/engaged in worst forms of child labor, children in conflict with the law (including due to being part of mixed movements or connected to crimes linked to substance selling/use) as well as victims or witnesses of crimes; children at risk of marriage/married/adolescent pregnant girls; LGBTQI+ children/adolescents and their families, as well as children caught in commercial sexual exploitation; children and adolescents with severe degree of trauma, stress and anxiety (especially in those areas with lack of/limited child specialized mental health and psycho-social support/treatment services); children out of school.

- Partners should disseminate information and raise awareness on PDMM registration and school enrolment procedures among households with school-aged children to **facilitate access to education**. Similarly, partners should support early identification, information sharing and safe referrals to available PDoFSS social protection, family welfare and child protection services available in operational areas, supporting dedicated case handholding and follow-up as needed as part of case management processes.
- Peer bullying is a major challenge in accessing/remaining in education as a significant factor in being/remaining out-of-school among refugee children and adolescents. Therefore, partners should initiate **sustained and structured activities addressing peer bullying** including through cooperation and collaboration with local schools, Provincial Directorate of Education and promoting positive peer-relations especially between Turkish and refugee children and youth and engage parents/caregivers from host and refugee communities to strengthen a supportive family and community environment².
- Child labor continues to be a persistent issue among refugee children. Stakeholders are encouraged to adopt **tailored nationality and location-based approaches in child labour prevention, risk mitigation, and response activities with a focus on worst forms of child labor**, primarily focusing on Syrian and Afghans in urban areas, with an increased focus in areas where worst forms of child labor are identified (such as Istanbul, Bursa); locations where children are engaged in seasonal/agricultural works; working in the street, including begging.- with an enhanced focus on outreach/mobile modalities of service delivery and cross-sectorial referrals to statutory services. All programmes related to child labour should include engagement with authorities both at central and provincial/local levels.
- CP partners are encouraged to collect and retain disaggregated information on children engaged in **other forms of child labor** to feed into advocacy works of the CP sub-sector with line ministries and public institutions, in collaboration with Child Labor Technical Working Group.
- Preventive and tailored programming and interventions to address **child, early and forced marriages** should be implemented. Prevention approach targeting all children in a community, or specific groups of children identified with high-risk of harmful outcomes could

² For more information, see the Education Sector Working Group's [Education Sector Needs Overview \(May 2024\)](#).



be done depending on the locality. The key prevention activities and interventions of focus should include, but not limited to, targeted sessions on legal awareness, parenting initiatives, household economic empowerment, adolescents' life skills sessions while on the sideline of individualized responses to cases of child marriage. Risk mitigation, prevention and response activities should primarily target individuals residing in urban areas, Afghans and Syrians.

- Partners are encouraged to focus on activities that improve **access to higher education** particularly to overcome financial difficulties as a barrier in participation for a better integration process and in order to support protection outcomes such as prevention of child, early and forced marriages.
- Partners should support expansion of mobile outreach **child protection services targeting most vulnerable/left behind population groups of refugee/migrant children and their families** (e.g., in informal settlements as a result of the earthquake, children of nomadic families / living in rural-agricultural settings, etc.), supporting assessments and protection needs identification, case management (with a focus on medium and high risk cases considering the limited resources and still vast needs in the field), referrals and service uptake.
- Partners should support the **implementation of structured, sustained and specialized MHPSS programmes and services rather than one off sessions** (especially transitioning from Level 2 to Level 3 and Level 4 structured services of the IASC MHPSS Pyramid), considering the protracted and intensified needs resulting from the earthquake recovery efforts, with a specific focus on structured and sustained programmes and counselling services targeted for adolescent girls and boys in addressing trauma/anger management/addictions, and caregivers' parenting/MHPSS complementary support services. Organizations should ensure HR capacity across the different levels of MHPSS services and continuous capacity building / supervision and staff wellbeing support for frontline staff and particularly to staff providing MHPSS services (both L3 focused non-specialized, as well as L4 specialized services).
- Overall child protection activities should have a **prevention lense**³ not just response; should aim to support parenting and care giving capacities of refugees in their networks through community-based child protection platforms, especially for households with children at risk. Programmes should support children's, adolescents' and caregivers' empowerment towards self-protection and increased resilience, limiting dependence on external aid and support, rather promoting ownership and shared accountability. Partners should support successful models of adolescent/youth mobilization/engagement (including as related to mentorship, role modelling, leadership and volunteerism programmes, etc.).
- Due to the structurally complex nature of child protection concerns, child protection programmes should strive to have always have clear **programmatic linkages/ connections with other cross-sectoral service components**, e.g., as related to household economic empowerment, education, skills and employability, health, including MHPSS and adolescent

³ See [Primary Prevention Framework for Child Protection in Humanitarian Action](#) and [INSPIRE: Seven strategies for ending violence against children](#).



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health, gender and GBV programming, social norms change, access to legal services and justice, etc.

- Child Protection programmes should focus on complementarities and support to national child protection systems with a view to ongoing inclusion of refugee children and their families into the national child protection system and to the extent possible promoting strategies to further support/integrate into national services. Investments in partnerships/service complementarities between NGOs/statutory services/local authorities to ensure ownership, service transition and sustainability in a context of reducing funding in the country are highly recommended.

Gender-Based Violence

- During programming, partners should engage with **key national strategic** frameworks including [IV. National Action Plan on Combating Violence Against Women \(2021-2025\)](#).
- Given the **lack of data disaggregated by gender and age concerning women and girls with disabilities, partners are encouraged to adopt tailored approaches** to gather and share such data.
- Partners are encouraged to **incorporate intersectional approaches in programming that address the multiple and overlapping forms of discrimination** faced by women, girls, LGBTI+s, older persons at risk, persons with disabilities and other most vulnerable populations.
- As the demand for legal aid increases among GBV survivors, particularly for persons pending registration and documentation, partners are encouraged to **develop tailored approaches to expand their capacity in providing legal assistance**.
- Partners are encouraged to include **emergency preparedness efforts that integrate an intersectional approach addressing the specific needs** of persons with disabilities, older persons at risk, women and girls, LGBTI+s and GBV survivors in response to gender-based violence.
- Programming should focus on decreasing the risks in regard to **barriers on documentation** in order for **GBV survivors to access life-saving services**.
- Partners are encouraged to take action in regard to **social transformation and social norm change**, such as awareness raising, campaigns targeting communities and working with men & boys.
- During programming, partners should focus on **capacity building of law enforcement units in regard to GBV**.
- Programming should consider **cash-based interventions for accessing safe housing conditions after moving from the container sites for GBV survivors** in the upcoming period.



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- Partners are encouraged to develop **cooperation with GBV and non-GBV actors to address barriers** to service provision and improve service access and mainstream GBV risk mitigation.

Collaboration with Non-Protection Actors

- Sector partners are encouraged to **facilitate referrals to livelihoods actors**, to support individuals/households in identifying sustainable and predictable livelihood opportunities and complementary social assistance. When possible, referrals should prioritize female-headed households, Iranians, individuals residing in the Aegean region, and urban residents as these groups, are among those most unable to fully meet their basic needs. The same engagement should apply with Shelter and Wash partners active in the EQ affected areas.
- Considering that many individuals are engaged in informal and short-term or irregular jobs, partners should prioritize **long-term, sustainable cross-sectoral interventions**, including activities focusing on economic empowerment, basic needs, livelihoods, and engagement with the private sector, among others, to help prevent further protection risks.
- Partners are encouraged to implement interventions focused on **cash programming** in response to the growing need for social assistance, while ensuring sustainability of interventions with a lense to support the national social protection system. Additionally, sector partners are advised to strengthen their **advocacy efforts with donors** for sustained funding in this area **considering the linkages between cash and protection outcomes**.