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| QUESTIONNAIRE ON National PROTECTION MECHANISMS FOR HUMAN RIGHTS DEFENDERS | | | | | | | | | | | | | | | | | | | | |
| Information provided in response to this questionnaire may be used by the IACHR for the purposes of reports, monitoring, and follow-up. The present questionnaire has been created to collect information from States, civil society, academia, and other interested parties for the Rapporteurship on Human Rights Defenders’ preparation of a thematic report on protection mechanisms for human rights defenders, including justice operators, at the national and local levels in OAS Member States. The Inter-American Commission on Human Rights invites these stakeholders to submit their responses to this questionnaire providing detailed information on the existing national protection mechanisms (and sub-national mechanisms, where applicable), including their legal source, process, actors involved, challenges, achievements and good practices, among other information requested below, by **August 15, 2016**, to the following address:  Inter-American Commission on Human Rights  Organization of American States  c/o Rapporteurship on Human Rights Defenders  1889 F St NW  Washington, D.C. 20006  [cidhdefensores@oas.org](mailto:cidhdefensores@oas.org)  [cidhtematico@oas.org](mailto:cidhtematico@oas.org)  If submitted electronically, the topic of the e-mail should be: **Protection Mechanisms Questionnaire - Human Rights Defenders**. | | | | | | | | | | | | | | | | | | | | |
| OAS Member State: | | | |  | | | | | | | | |  | | | | | | | |
| **Entity/Organization Responsible for Completing Form:** | | | | | | | | | | | | | | | | | | | | |
| Contact Information: (Please write full name) | | | | |  | | | | Phone: **Email:** | | | | | |  | | | | | |
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| 1. Does the State have a protection mechanism for human rights defenders (HRDs) and/or justice operators (JOs)? | | | | | | | | | | | | | |  | | Yes | |  | | No | |
| If yes, protection mechanism covers:  HRDs only  JOs only  Both HRDs & JOs  HRDs & Journalists  Other (explain below)  *Other:* | | | | | | | | | | | | | | | | | | | | | |
| 1. The protection mechanism is different than a witness protection program | | | | | | | | | | | | | |  | | Yes | |  | | No | |
| 1. Please provide the following information: | | | | | | | | | | | | | | | | | | | | | |
| (a) | *Citation of establishing source/document/legislation/public policy or program, etc. for protection mechanism (including date):* | | | | | | | | | | | | | | | | | | | | |
| (b) | *Citation of implementing legislation, regulations, or rules (if any):* | | | | | | | | | | | | | | | | | | | | |
| (c) | *Location of protection mechanism (stand-alone agency or within another department or ministry):* | | | | | | | | | | | | | | | | | | | | |
| 1. Please list the types of protection available for a HRD and/or JO (including both services and measures, such as cell phones and bullet-proof vests): | | | | | | | | | | | | | | | | | | | | | |
| 1. Please list all actors involved in the processing of a request to activate a protection mechanism as well as in its implementation. Which security forces, if any, are involved and how? | | | | | | | | | | | | | | | | | | | | | |
| 1. Please describe the process to request protection from start to finish, including all possible outcomes (a separate document may be attached; responses may include a flow chart as long as sufficiently detailed or explained). Please include the following in the response: | | | | | | | | | | | | | | | | | | | | | |
| (a) | Risk analysis – the methodology and criteria used to determine the level of risk faced by a HRD, JO or a group of HRDs/JOs. Please indicate whether such aspects, such as contextual ones or those regarding their specific activities, are taken into consideration as well as whether the risk analysis is shared with the applicant/proposed beneficiary | | | | | | | | | | | | | | | | | | | | |
| (b) | How extremely urgent and/or sensitive requests are identified and handled | | | | | | | | | | | | | | | | | | | | |
| (c) | Whether the request requires the consent of the HRD to proceed and who may submit a request, including whether it is possible for the State to *ex officio* initiate a request | | | | | | | | | | | | | | | | | | | | |
| (d) | The requirements in order to request or receive protection (for example, whether it is required to submit a police report or complaint on the harassment or acts of aggression experienced in order to be able to request or receive protection) | | | | | | | | | | | | | | | | | | | | |
| (e) | Whether and how a gender perspective and ethno-racial perspective are taken into consideration in all stages of a request for protection measures | | | | | | | | | | | | | | | | | | | | |
| (f) | Method of determining which protection measures are necessary (including whether the beneficiary is consulted) and the timeframe to implement such measures | | | | | | | | | | | | | | | | | | | | |
| (g) | When and how frequently the State meets with the HRD and/or his or her representatives, and how the parties communicate between meetings, once protection measures are ordered | | | | | | | | | | | | | | | | | | | | |
| (h) | How are protection measures lifted, whether they are lifted progressively or in another manner, and what is the procedure if a de-activated risk turns active again | | | | | | | | | | | | | | | | | | | | |
| (i) | Length of time that a request takes to process from start to finish | | | | | | | | | | | | | | | | | | | | |
| 1. Please indicate whether there is any difference in the process if the alleged aggressor/source of risk for the HRD is presumed to be a State agent. | | | | | | | | | | | | | | | | | | | | | |
| 1. Are preventative measures included within the protection mechanism/program? If so, what do these consist of and how are they applied? | | | | | | | | | | | | | | | | | | | | | |
| 1. Is there an investigative component of the protection mechanism/program? Additionally, how does the protection mechanism/program collaborate with the traditional investigative authorities in your country (such as the prosecutor or attorney general’s office)? | | | | | | | | | | | | | | | | | | | | | |
| 1. If the IACHR issues precautionary measures and requests the adoption of protection measures for a person(s) within the State, how is this request processed? | | | | | | | | | | | | | | | | | | | | | |
| 1. Please indicate whether the protection mechanism guarantees access in other languages (e.g., indigenous languages), and if so, please list all languages available. | | | | | | | | | | | | | | | | | | | | | |
| 1. Is civil society is involved in the mechanism? If so, how? | | | | | | | | | | | | | | | | | | | | | |
| 1. **Data.** Please provide detailed information on the following items (may require a separate annex) | | | | | | | | | | | | | | | | | | | | | |
| 1. **Number of protection measures** | | | | | | **Requests received** | | | | | | | | | | |
| 2016 (Jan.-Mar.) | | |  | | | | | | | |
| 2015 | | |  | | | | | | | |
| 2014 | | |  | | | | | | | |
| 2013 | | |  | | | | | | | |
|  | **Number of granted protection measures** | | | **Number of rejected requests for protection measures** | **Number of unresolved requests for protection measures** | | | **Number of fully implemented protection measures** | | | | | | | | |
| **2016 (Jan-Mar)** |  | | |  |  | | |  | | | | | | | | |
| **2015** |  | | |  |  | | |  | | | | | | | | |
| **2014** |  | | |  |  | | |  | | | | | | | | |
| **2013** |  | | |  |  | | |  | | | | | | | | |
| **Total** |  | | |  |  | | |  | | | | | | | | |
| 1. **2015 Annual budget of the mechanism (in USD)** | | | | | | | | $ | | | | | | | | |
| 1. **Requesting HRD:** Please provide detailed information on the population of human rights defenders-beneficiaries, including as much information as possible on the following: the causes they advance, the cause(s)/source(s) of risk, their locations within the country, and disaggregated data on their sex and age. | | | | | | | | | | | | | | | | |
| 1. **Best practices and accomplishments to-date.** Please list best practices and major accomplishments of the protection system. | | | | | | | | | | | | | | | | | | | | | |
| 1. **Challenges faced**. Please list main challenges to the protection mechanism (e.g., not fully implemented, budget shortfalls, lack of qualified personnel, communication gaps, lack of participation of all sectors) and any practices that should be changed. | | | | | | | | | | | | | | | | | | | | | |
| 1. **Transparency.** Please explain whether the authority in charge of the protection mechanism must submit periodic reports providing accountability and transparency on the activities and operations of the mechanism. If so, how often? To whom must the authority report? | | | | | | | | | | | | | | | | | | | | | |

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| **\*\*OTHER INFORMATION.** **Please annex any additional information. If the information corresponds to one of the questions in this survey, please clearly label the question number on the document. Thank you!** |