

This note sets out some practical steps that Humanitarian Coordinators (HCs) and Humanitarian Country Teams (HCTs) can take to ensure that accountability to affected people (AAP) guides humanitarian response. It builds on practical examples captured during a field mission to Iraq in August 2016 undertaken by the Senior Transformative Agenda Implementation Team (STAIT) and members of the Inter-Agency Standing Committee (IASC) AAP and Protection from Sexual Exploitation and Abuse (PSEA) Task Team. It also builds on elements from Nepal, Burundi, the Democratic Republic of the Congo (DRC), South Sudan, and Sudan (Darfur)ⁱ and reflects current AAP technical guidance. However, there is unfortunately insufficient guidance for HCs/HCTs on what is a 'collective AAP approach' and what concrete steps they should take, or task others to take to make collective AAP a reality across operations. Practical advice specifically designed for HCs/HCTs on collective AAP approaches is therefore required.

WHAT IS ACCOUNTABILITY TO AFFECTED PEOPLE?

The women, men, girls and boys receiving humanitarian assistance are the primary stakeholders of any humanitarian response and have a basic right to participate in the decisions that affect their lives, receive the information they need to make informed decisions and to provide suggestions and complain if they feel the help they receive is not adequate or has unwelcomed consequences.ⁱⁱ

AAP is "an active commitment by humanitarian actors and organizations to use power responsibly by taking account of, giving account to and being held to account by the people they seek to assist". It requires humanitarian actors to involve people affected by crisis in key decisions and processes that impact them, and have effective communication and feedback channels that engage all sectors in a community, especially those most vulnerable or marginalised. Feedback and complaints mechanisms are required so that problems can be addressed and appropriate action taken. AAP is applicable to all phases of the programme cycle, including at the strategic level of the HCs/HCTs.

ACCOUNTABILITY TO AFFECTED PEOPLE: THE BACKBONE OF DIGNIFIED, QUALITY AND SAFE HUMANITARIAN ACTION

AAP reaffirms the human dignity and rights of people affected by crisis. Human dignity underpins international humanitarian and human rights laws, including the core principles of humanity and impartiality. Central to human dignity is informed consent and accountability which necessitates that people have access to adequate information and can influence decisions that impact them.

AAP is essential for quality programming. Targeted, quality and timely humanitarian action can only be achieved by knowing what people want and need, as well as understanding their practices, capacities and coping strategies. Further, as contexts evolve so do peoples' views which requires engagement with people and adaptation of programmes and strategies throughout the different stages of operationsⁱⁱ.

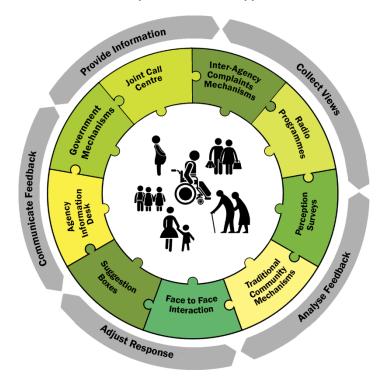
AAP underpins effective access strategies and security management. Acceptance based access strategies require a solid and up to date understanding of the perceptions of affected people. Adapting programmes and behaviour based on community perceptions, and effectively responding to their concerns is crucial for building trust and acceptance.

WHY IS COLLECTIVE ACCOUNTABILITY TO AFFECTED PEOPLE IMPORTANT FOR HCs AND HCTs?

Organisational accountability is about the power relationship between one organisation and the people it assists.... Collective accountability, however, is about the responsibility of all humanitarian organisations active in a response for giving high quality assistance and achieving humanitarian goals.⁷¹¹

Most humanitarian organisations will have their own AAP systems focused on those who directly benefit from their activities. Whereas, collective AAP approaches have a broader focus on the views, feedback and complaints of people across the totality of the response, including those who may not be receiving assistance or protection. For HCs and HCTs, collective AAP approaches are critical for understanding the overall needs and preferences of affected people across the response, identifying where gaps exist and guiding the prioritisation of sectors and locations.

Leadership by the HC/HCT on a collective AAP approach is required in a number of areas, including support for collective AAP mechanisms. As illustrated in Diagram A, a collective AAP approach brings together information from collective mechanisms (such joint call centres and radio programmes), with trends from the information sharing, feedback and complaints systems of individual organisations. However, whilst the systems of individual organisations are important and should feed into collective AAP approaches, wherever possible, organisations should work together to utilise collective mechanisms to reduce the burden on the affected population of dealing with multiple and duplicate systems.



A: An example of a collective approach to AAP

KEY STEPS HCS AND HCTS CAN TAKE TO PUT ACCOUNTABILITY TO AFFECTED PEOPLE INTO PRACTICE

- 1. Lead by example. Senior humanitarian leaders should talk directly to people affected by crisis as often as they can. They should regularly ask people in frontline and management positions within their organisation what they hear from affected people and how they have responded to their views.
- 2. Support local and national organisations to be represented within, and have influence over the humanitarian response, including within clusters and the HCT. Build on local and national actors' understanding of local populations, as well as their established working relationships and two-way communication mechanisms with affected people. See the STAIT webinar, *As Local and Possible as International as Necessary: Practical Steps^{iv}*.
- 3. Integrate Accountability to Affected People across the programme cycle:
 - Ensure that communities' preferred channels of communication, languages and cultural practices are mapped and integrated into preparedness actions and design, including the design of the tailor-made collective AAP mechanisms (see point 5). The mapping should include the normal communication mechanisms of different groups, government and civil society, including whether they exclude specific groups or individuals. Integrate cultural practices into preparedness actions and programme design where applicable.

- Ensure that joint and sector specific needs assessments and analysis are participatory with meaningful engagement across different groups within the crisis-affected population. Assessments should not just involve technical surveys or rely only on technological platforms without face-to-face engagement with affected people
- Ensure that the Humanitarian Response Plan (HRP) and other important HCT decisions are based on the voice and priorities of affected people. Insert a clear commitment to AAP in the response strategy and each cluster plan. For example, the Iraq and DRC HRPs^v Use a common framework such as the 9 commitments of the Core Humanitarian Standards (CHS)^{vi} to facilitate joint analysis, approaches and funding. For example, the CHS is being used in the DRC. Share key documents with communities in an accessible format.
- Monitor the perception of affected people on the response. For example, in Sierra Leone Ground Truth used perception surveys to reveal people's concerns about quarantine restrictions during the Ebola crisis. Organisations used this data to adjust their response.^{vii}
- 4. Receive regular updates on the views and feedback from affected people and agree on clear focal points and responsibilities for Accountability to Affected People across the response. The HC and HCT require regular and consolidated updates clearly setting out the views of affected people on key elements of the humanitarian response. Collective AAP approaches also requires clear delineation of roles and responsibilities within the HCT, Inter-Cluster Coordination Group (ICCG) and clusters, including designation of focal points to ensure that follow-up across the system. The HC/HCT should therefore:
 - Nominate a focal point that is responsible for consolidating AAP analysis across the AAP systems of individual organisations and collective mechanisms in-country. This person should have a direct link to the Chair of the ICCG. For example, the head of a joint call centre could take on this role.
 - Include AAP as a standing item on the ICCG agenda where the AAP focal point presents the consolidated analysis
 of community suggestions, referrals and complaints to the group every fortnight. The ICCG should agree on followup actions, including how to adjust programmes, targeting and areas of intervention
 - Each quarter, have a dedicated HCT discussion on AAP trends at the HCT with focus on the strategic direction of the response, gaps, duplication, positive feedback and complaints. Task the Chair of the ICCG to present a short report on the main trends, key complaints and actions taken by the clusters and organisations, as well as recommended follow-up actions required by the HC/HCT.
- 5. Support tailor-made collective mechanisms for communicating with communities and addressing feedback, including with contributions from pooled funds. An effective collective AAP approach brings together the information, views and feedback of affected people into a consolidated analysis. This analysis should be compiled by the ICCG focal point. Wherever possible, organisations should seek to limit the demands on affected people for information and feedback by strongly supporting collective mechanisms. This may require a number of the larger UN agencies and NGOs to come together in partnerships or consortia, and the active support of the HC and HCT. Some useful examples of collective mechanisms include:
 - The joint IDP call centre in Iraq provides communities with a one-stop shop for receiving information and referring cases to relevant clusters, and where applicable, organisations. There are female and male call staff who can take calls in the local languages. They are trained to address sensitive cases, receive regular updates from the clusters of new information and attend cluster meetings to provide feedback.^{viii} Working together with organisations the call centre has influenced cash programming modalities in Iraq. Organisations were receiving repeated requests for cash directly from affected people, whilst there were also a lot of calls to the inter-agency IDP call centre requesting cash. The combination of the findings led the HCT to require all clusters to include some cash programming.
 - A joint hotline has helped reduce the burden on IDPs in Darfur faced with many humanitarian actors with their own hotlines. It has also enabled some collation of trends that is fed into the response.^{ix}
 - Radio programmes by InterNews have been used to communicate with communities in South Sudan. On the UN managed Protection of Civilian sites, InterNews trains community representatives on how to collect people's perspectives which they then feed into radio programmes and to clusters when they can.^x
- 6. Put in place effective complaints mechanisms, especially for PSEA. A useful tool for HCs and HCTs is the recent IASC best practice guide on inter-agency complaints mechanisms. Although designed for ensuring that PSEA complaints are properly handled, it is applicable for other types of joint feedback and complaints mechanisms.^{xi}

SOME CONSIDERATIONS TO KEEP IN MIND

- Promote inclusivity: It is important for the HC and HCT to ensure that a collective AAP approach includes the voice of minorities and marginalised groups. This will often require specific targeting in an appropriate manner. For example, focus group discussions are often preferred by women. Relying on mass technology or only the voice of community leaders, can reinforce discriminatory practices within a response.
- Promote cooperation and complementarity: Leadership by the HC and HCT members within their organisations is critical for fostering cooperation and understanding of the added value of collective AAP approaches that complement individual organisations' systems. Joint hotlines and call centres can be resisted by organisations reluctant to share information or due to competitiveness.
- Promote flexible funding: The HC and HCT have a key role to advocate with donors to directly fund collective mechanisms and promote flexible funding so programmes can be easily adapted based on the changing preferences of affected people. Utilising pooled funds for collective mechanisms should also be considered.

KEY REFERENCES:

- STAIT, Iraq joint Internally Displaced Information Call Centre Case Study
- Best Practice Guide Inter Agency Community Based Complaint Mechanisms https://interagencystandingcommittee.org/node/17836
- FAQ on AAP, CHS Alliance, http://www.chsalliance.org/files/FAQs-AAP.pdf
- Global Standard Operating Procedures Best Practice Guide Inter Agency Community Based Complaint Mechanisms https://interagencystandingcommittee.org/node/17906
- Mapping of current Initiatives, interagency projects and key reports related to AAP -2016
 https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse/documents-48
- IASC EDG Preliminary Guidance Note: Protection and AAP in the programme cycle: <u>https://interagencystandingcommittee.org/system/files/edg</u> aap protection guidance note 2016.pdf
- Suggested actions to strengthen AAP and Protection for Clusters: <u>https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse/documents-45</u>
- Suggested actions to strengthen AAP and Protection for inter-cluster coordination https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse/documents-44
- Annex to the suggested actions for cluster and inter-cluster: Questions and Answers. <u>https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse/documents-46</u>
- Annex to the suggested actions for cluster and intercluster: Global Protection Cluster checklist based on the EDG guidance note on AAP and Protection <u>https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-andabuse/documents-47</u>

ⁱ https://interagencystandingcommittee.org/accountability-affected-people

ⁱⁱ FAQ on AAP, CHS Alliance, http://www.chsalliance.org/files/Files/FAQs-AAP.pdf

"FAQ on AAP, CHS Alliance, http://www.chsalliance.org/files/files/FAQs-AAP.pdf

^{iv} ps://deliveraidbetter.s3.amazonaws.com/media/page_pdfs/Localisation_-_Webinar_Summary.pdf

^v Iraq HRP, <u>https://www.humanitarianresponse.info/en/system/files/documents/files/final_iraq_2016_hrp_0.pdf</u> and DRC HRP: La communauté humanitaire continuera d'améliorer la qualité et la redevabilité de sa performance : (i) développant sa capacité de réponse immédiate aux urgences ; (ii) en renforçant la coordination et la priorisation des besoins, ainsi qu'en (iii) s'appuyant sur les principes directeurs de l'action humanitaire à travers des engagements CHS

- vi https://corehumanitarianstandard.org/ and http://www.chsalliance.org/
- vii http://groundtruthsolutions.org/our-work/countries/sierraleone/
- viii http://www.deliveraidbetter.org/pages/field-missions/learning-missions/iraq
- ^{ix}<u>http://www.unocha.org/sudan/about-ocha-sudan/darfur-call-centre</u>
- * https://internews.org/where-we-work/sub-saharan-africa/south-sudan
- ^{xi} Best Practice Guide Inter Agency Community Based Complaint Mechanisms https://interagencystandingcommittee.org/node/17836



The Senior Transformative Agenda Implementation Team (STAIT) was created by, and reports to, the Emergency Directors' Group (EDG). It provides peer support to Humanitarian Coordinators and Humanitarian Country Teams to deliver an effective, principled, quality, timely and predictable collective humanitarian response in field operations. See www.deliveraidbetter.org