**Suggested Actions for Inter-cluster coordination groups to strengthen accountability**

**Background**

This document provides suggested actions for Inter-cluster coordination groups (ICCGs) to improve accountability to affected people in field operations. While there is a consensus on the importance of Accountability to Affected Population in humanitarian response, country teams often raise the question “how do we actually do it?” The list of suggested actions provides ideas to ICCGs on how they could integrate accountability into the work of the group and throughout the humanitarian program cycle. These suggested actions build on existing accountability frameworks, such as the CHS and the IASC AAP Commitments and Operational Framework, as well as lessons learned from various crisis contexts. ICCGs are encouraged to review the suggested actions and make an assessment of whether an action is feasible or not or whether it should be adapted according to the particularities of each context.

While each humanitarian agency has a responsibility to engage communities and be accountable to the population it serves, this document is specifically focused on “collective accountability” achieved through the ICCG. The role of the inter cluster coordinator is to provide a space for accountability to be discussed in ICCG meetings, to ensure it is part of the HPC and to support the cluster coordinators in operationalising accountability. A list of suggested actions for the Cluster Coordination Groups complements this document. Both are accompanied by suggested indicators which should help the intended groups measure their progress on strengthening accountability.

The following questions and answers sections help show how AAP relates to several existing commitments, tools and mechanisms used by clusters.

**Questions and Answers:**

**Where do the suggested actions come from?**

The suggested actions are derived from the following:

* the [Core Humanitarian Standard on Quality and Accountability (CHS)](http://www.corehumanitarianstandard.org),
* the IASC five Core commitments on Accountability to Affected Populations (Leadership; Transparency; Feedback and Complaints; Design, Monitoring and Evaluation; Participation)
* [The Global Protection Cluster Protection mainstreaming guidance](http://www.globalprotectioncluster.org/en/areas-of-responsibility/protection-mainstreaming.html)
* Lessons learned from various contexts.

**What is AAP?**

There are many dimensions to accountability, but in summary, Accountability to Affected Populations (AAP) is an active commitment for aid workers and organisations to use the power and resource entrusted to them ethically and responsibly, combined with effective and quality programming that recognizes the community’s dignity, capacity and rights to participate in decisions that affect them. Being accountable means taking account of the views of affected people in the design and implementation of aid activities, collecting and acting upon feedback from them, and being held to account for the quality, fairness and effectiveness of their actions.

**What is the Core Humanitarian Standard on Quality and Accountability (CHS)?**

The CHS is the result of wide consultation with NGOs, the UN, Global Clusters and governments on how to define quality and accountability in humanitarian actions. It sets out nine inter-related commitments to communities and people affected by crisis, stating what they can expect from individuals and organizations delivering humanitarian assistance. The nine commitments are based on recognised good practices in the both the way responses are designed and delivered and on the relationship between aid organisations and affected people.

The CHS harmonises and replaces, the Sphere Core Standards, the former HAP accountability benchmarks, and the People In Aid Code into a single, consolidated framework.

For more information, please see: [www.corehumanitarianstandard.org](http://www.corehumanitarianstandard.org)

**What are the IASC five core commitments?**

Accountability is one of the three pillars of the Transformative Agenda and the IASC principles, committed to creating a system-wide “culture of accountability” by endorsing these 5 commitments: Leadership/Governance; Transparency; Feedback and Complaints Participation, Design, monitoring and evaluation. The IASC AAP Operational framework is designed to assist agencies both individually and in groups to find practical entry points for improving accountability to affected populations. For each objective, it highlights the relevant phase of the HPC, responsibilities, and suggested indicators, means of verification, risks and additional tools.

**How does the AAP relate to technical standards used by clusters?**

AAP is also about ensuring the quality and consistency of a response. Clusters play a key role in promoting harmonised approaches to ensure there are no gaps in the quality or coverage of a response. In this regard, AAP commitments, and the CHS in particular, were designed to complement and reinforce, not replace, existing technical and programming standards, such as Sphere, Child Protection Minimum Standards and other specific standards and guidelines, used by organisations and clusters. These standards reflect and give practical expression to the human rights of affected populations under international law and the related principles of participation and accountability, essential elements in a rights based approach.

The CHS includes indicators, key actions, and organisational responsibilities to ensure that relevant technical standards are used in programmes. Cluster coordination groups can leverage these commitments to advocate for all aid organisations to use apply existing standards whenever possible or appropriate, as well as document and share successes, challenges and lessons learned in applying technical and quality standards in different crisis contexts, in line with the HPC and clusters responsibilities for monitoring and evaluation.

**What is the link between Accountability and Protection Mainstreaming?**

Accountability is not only about improving humanitarian program effectiveness but also about ensuring affected people can exercise their rights. Protection mainstreaming is about ensuring protection-sensitive humanitarian programmes, and thus constitutes a crucial pillar of programme quality. It is the process of incorporating protection principles and promoting meaningful access, safety and dignity in humanitarian aid. The following elements must be taken into account in all humanitarian activities. **1) Prioritize safety &dignity, and avoid causing harm:** Prevent and minimize as much as possible any unintended negative effects of your intervention which can increase people's vulnerability to both physical and psychosocial risks. **2) Meaningful Access:** Arrange for people’s access to assistance and services – in proportion to need and without any barriers (e.g. discrimination). Pay special attention to individuals and groups who may be particularly vulnerable or have difficulty accessing assistance and services. **3) Accountability:** Set-up appropriate mechanisms through which affected populations can measure the adequacy of interventions, and address concerns and complaints. **4) Participation and empowerment:** Support the development of self protection capacities and assist people to claim their rights, including – not exclusively – the rights to shelter, food, water and sanitation, health, and education.

**What is the link between Accountability and Protection from Sexual Exploitation and Abuse?**

Sexual Exploitation and Abuse of affected community members by anyone associated with the provision of aid constitutes one of the most serious breaches of humanitarian accountability. Exploitation frequently occurs when the essential needs of those most at-risk in communities are not adequately met. Issues of impunity and lack of accountability in relation to sexual exploitation and abuse are derived from existing asymmetries in the balance of power. It is a serious protection concern, and erodes the confidence and trust of affected communities and other stakeholders (host States, donors, media and the public) in all those providing assistance. This is why protection from sexual exploitation and abuse is an essential issue of accountability.

Cluster coordination groups can play a key role to discuss and identify risks and integrate prevention strategies into cluster work plans, and advocate that all cluster members have appropriate mechanisms in place to deal with any issues of exploitation and abuse. They can also ensure that any issues are brought to the attention of the appropriate stakeholders for action, such as the Humanitarian Coordinator.

**What is the link between Accountability and Communications with Communities(CwC)/Community engagement?**

Communication with Communities is defined as a programmatic field of work through which humanitarian organisations can be accountable, and includes three operational components: *feedback/complaints, participation and information provision.* Community Engagement is now a preferred term for many organizations, as it implies a more active process which should sit with programming and not only with “communications” or “public information” teams.

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| Inter Cluster Coordination Group  Suggested actions to integrate Accountability in Humanitarian Action : | | Possible Indicators |
| Coordination | The ICCG should be a forum to promote and share among cluster coordinators advice and materials on AAP and PSEA. For example:   * Ensure all cluster coordinators are looking at ways and means to strengthen national NGO engagement in the clusters. * Ensure all cluster coordinators have access to and are disseminating within their clusters relevant guidance, toolkits and resources on AAP as well as raising awareness of PSEA commitments, codes of conduct etc. * Discuss the appropriateness of establishing a sub working group on accountability and community engagement which would be directly linked to the ICCG. * At each ICCG meeting, review the aggregate results coming through complaints and feedback mechanisms to identify the key issues and concerns and report to the Humanitarian Coordinator and the Humanitarian Country Team on key strategic issues. Collectively define solutions and track progress on addressing them. * Develop 4Ws matrix on accountability activities with input from each of the clusters. Focus on activities which have an impact beyond a specific project/programme and are of concern to other organisations and need to be coordinated, as well as best practice worth sharing for replication. * In a context where clusters are transitioning to other coordination models (sectors, government-led working groups, etc.) and the humanitarians work to ensure coordination linkages with recovery/development plans, the ICCG should inform/hand-over to the recovery/ developments actors (RC Office, UNDP, Early recovery Cluster) materials, advice and lesson learnt on AAP and PSEA. | * Existence of an up-to-date matrix at inter cluster level on activities related to AAP * % of ICCG and HCT meetings which discuss and have follow-up action points on key issues and concerns identified in the reports of feedback and complaints mechanisms (use cluster meeting minutes to measure). |
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| Preparedness | The ICCG should initiate or support the RC/HC in organising a meeting/workshop preferably at inter-agency level to review current accountability practices, existing mechanisms (including traditional/Government), gaps and opportunities. Use the workshop to identify preparedness actions which would assist in operationalising accountability in a humanitarian response. Depending on what the gaps and opportunities are the follow-up actions could include:   * Explore the opportunity for an inter-agency joint feedback and complaints mechanism using lessons learned from other contexts, including the global SOPs on Inter agency complaints mechanism on PSEA * Support the roll-out of training for humanitarian partners (UN, INGOs, NNGOs) to raise awareness and capacity on what accountability is about and how to concretely operationalise it. * Identify the most appropriate communication channels for communities, taking into account the preferences of specific groups. * Share within the ICCG information or reports on common cultural practices or preferences, identified through consultations with communities at risk, which would inform relevant and effective response activities (for example preferred rice, ways in which health services are delivered, children cared for, existing community based protection strategies etc.). | * Meeting/workshop has taken place at inter-agency level to identify preparedness actions which would assist to operationalise accountability. * Inter agency SOPs on joint feedback and complaints mechanisms exist. * Existence of mapping of country’s communication landscape * Existence of summary of cultural practices to be specifically taken into account for programming. * Orientation/training on accountability has taken place. |
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| Needs assessments and analysis | The ICCG should agree on steps to strengthen accountability in assessments and analysis, including:   * Agree on a coordinated approach to assessments and the use of participatory methodologies, in particular for the MIRA. Ensure local organisations are involved in inter agency assessments * Ensure assessments include a representative sampling of the population (capturing age and gender, and specific groups at risk of discrimination or who are particularly vulnerable). * Promote the inclusion of questions in assessments to identify information needs, existing local capacity, protection concerns, preferred solutions to needs, and preferred ways to provide feedback/complaints. * Promote the use of open questions for all assessments, such as “what are your top priorities?” * Agree on how to communicate to communities the results of the assessments and next steps in order to manage expectations when expressed needs and priorities go beyond what can be delivered in terms of assistance and protection. * Agree on how to pass on information on expressed needs related to other sectors. * Share analysis of the situation in the ICCG and reach a common understanding of the problems including protection issues across the clusters. This will help determine a set of shared priorities before working into clusters. * Explore opportunities to validate the results of MIRA and HNO with community members | * % of joint assessments which include representative sampling of the population and disaggregated data * % of joint needs assessments which include open questions * Summary of information needs are included in the HNO / MIRA reports. * A consultation with community members on the results of the MIRA and HNO, took place. |
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| Strategic response planning | * Ensure HRPs are directly based on the finding of participatory assessments and joint analysis of priority needs. Ensure HRPs takes into account locally available resources (human and financial) * Agree that beneficiary selection processes are transparent and informed by engagement with affected population. * Address issues which might not be covered by any specific cluster or might be common to several clusters, including protection aspects. * Inter agency feedback and complaints mechanism should cover complaints on quality and appropriateness of programs, targeting, as well as sensitive complaints such as fraud, corruption or sexual exploitation and abuse. Ensure the back-end systems are different and adapted when dealing with sensitive complaints. * Translate HRP into accessible format to share with communities and, if possible, validate HRP priorities with a cross section of community members, with respect to age, gender and diversity. | * HRP is based on needs assessments which included representative sampling of the population and disaggregated data. * HRP has been translated, shared in appropriate formats. |
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| Implementation and Monitoring | * Harmonise and agree on messages to communicate with communities regarding the conduct to be expected of humanitarian actors as well as their rights and the way to provide feedback and complaints * Design a coordinated plan for disseminating messages on what has been delivered (both assistance and protection) and what lies ahead, as well as what has been done with the complaints and feedback. * Identify common trends in (joint) feedback and complaints mechanisms and participatory monitoring, and ensure these are informing any strategic and programmatic decisions and where necessary communicate back to the community regarding the way their feedback has been taken to account. * Establish an inter-cluster mechanism to monitor affected population perception of the humanitarian response on a regular basis, and of adequacy of information provision and engagement in decision making. | * Existence of a coordinated plan to disseminate messages to communities * Number of ICCG meetings which include analysis of joint feedback and complaints. * Existence of perception survey mechanism * Number of action points at ICCG/HCT level linked to joint feedback and complaints mechanism and perception surveys |
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| Resource mobilisation | * Agree and advocate for resources to support a collective, inter agency mechanism, to deal with complaints and feedback, and could be extended further to include joint community consultations and public information campaigns. * Promote the use of in-country pooled funding mechanisms such as ERFs and CHFs to support specific activities or projects which involve facilitating community consultations, information campaigns and/or complaint and feedback mechanisms * Where applicable, encourage a dialogue with donors (likely through the HC or HCT) to encourage funding flexibility, to enable to adapt to changes stemming from feedback mechanisms * Ensure communities are informed in case of budget cut with impact in terms of targeting or scope/ content of the humanitarian assistance. | * % of pooled funding mechanisms supporting activities linked with accountability to affected populations and community engagement |
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| Evaluation | * Agree across clusters on appropriate level of community participation in evaluation methodologies. * Share results of evaluations with communities to finalise the project and capitalise lessons learned including communities point of view on the intervention. * Ensure lessons learned on accountability and PSEA from one phase of the response are taken into account for the next phase. | * % of partners within the cluster who undertake programme evaluations in accordance with the agreed level of community participation. |