Success indicators against good practices related to participation of people affected by crisis in humanitarian decisions

Grand Bargain, PR workstream, Dec 2018

1. GOOD PRACTICES TO ACHIEVE GRAND BARGAIN PARTICIPATION REVOLUTION INDIVIDUAL COMMITMENTS, AND SUCCESS INDICATORS

Good practices to achieve individual commitments - aid organisations:

1) Aid agencies continuously provide essential and life-saving information to affected people and systematically collect, report and act on feedback from affected people at key decision points in the program cycle, explaining how their programming has been adapted to reflect these views. When possible, the feedback from affected people is complemented and verified by affected people’s views and perspectives collected independently from the organisation providing assistance.

2) Aid agencies ensure that all segments of the affected population have the capacity to engage in effective participatory processes.

Indicators

1. Each aid organisation adopts the CHS or the IASC CAAP and demonstrates that its policies and practices are aligned with this commitment. This demonstration must include feedback on affected people’s perceptions of their engagement which is collected and processed independently from operational agendas, and disaggregated by sex, age and vulnerabilities.

Proposed data source(s):
Each organisations’ CHS or IASC CAAP verification reports.

2. Each aid organisations demonstrates that its decision making is based on the engagement of affected people through mechanisms preferred by affected people. Evidence of this engagement should manifest itself in needs analysis, programme planning, M and E reports and recommendations, funding proposals and minutes of operational decision-making meetings.

Proposed data source(s):
Each organisations’ needs assessments reports, programme plans, M&E reports and recommendations, records of operational meetings, funding proposals and reports.
Good practices to achieve individual commitments - donors:

a) Donors require and enable aid organizations to provide evidence that their programming takes feedback from affected people into consideration at all stages of the programme cycle.

**Indicators**

3. Each donor requires funding partners to apply the CHS or IASC CAAP in their humanitarian work, and to provide evidence that their programming takes feedback from affected people into consideration at all stages of the programme cycle, in line with the CHS or the IASC CAAP.

*Proposed data source(s):*
Each donor’s policies.

4. Each donor makes it explicit that it allows aid organizations that access its funding to adapt their response to consider affected people’s feedback on how their needs are evolving

*Proposed data source(s):*
Each donor’s policies or funding guidelines.

5. Each donor makes funding available for participation-related mechanisms for which affected people have expressed their preference, including in relation to SEA.

*Proposed data source(s):*
Each donor’s reports.

2. GOOD PRACTICES TO ACHIEVE GRAND BARGAIN PARTICIPATION REVOLUTION COLLECTIVE COMMITMENTS, AND PROPOSED SUCCESS INDICATORS

Good practices to achieve collective commitments - aid organisations:

13) Multi-sector needs assessment include questions to ascertain how communities wish to receive and provide feedback on the quality of the response and on issues which affect them personally such as corruption and sexual exploitation and abuse (SEA).

14) Aid organisations actively collaborate, including with local and national organisations and host governments, in coordinated approaches to effective participation, the outcomes of which are integrated in Humanitarian Needs Overviews (HNO), Humanitarian Response Plans (HRP) or other Humanitarian Plans¹ and complement agency-specific activities.

15) Monitoring and reporting on HRP, Real Time Evaluations (RTE) and Inter-Agency Humanitarian Evaluations (IAHE) include analysis of how the response has been adapted to reflect the views and feedback from affected people.

16) Aid organisations consolidate information and perspectives of affected people so they are accessible to government and non-state armed group (NSAG) counterparts, Humanitarian Coordinators (HC), Humanitarian Country Teams (HCT) and individual agencies.

17) Aid organisations’ individual complaint and feedback mechanisms are harmonized and linked with collective mechanisms, to the extent that this improves efficiency and makes it easier for affected people to share their complaints.

¹ For organisations which do not participate in the HRP, such as for example Red Cross / Red Crescent.
**Indicators**

**At country level:**

i. In-country collective leadership and coordination mechanisms\(^2\) demonstrate that operational decision-making is explicitly informed by the views of affected people, disaggregated by sex, age and vulnerabilities, by establishing a baseline of participation practices, setting specific timebound targets, monitoring progress and evaluating results.

Practically this translates into the operationalisation of CHS commitments 4 and 5 or IASC CAAP into HRP, and the monitoring of their implementation through specific indicators, such as for example the % of people disaggregated by sex, age and specific vulnerabilities satisfied by the response; the % who consider that they have timely access to relevant and clear information; the % who know about complaints procedures, including in relation to SEA, and consider these accessible, effective and safe; with evidence gathered through regular independent perception surveys of the affected population.

**Proposed data source(s):**
- HRP
- Data from independent perception surveys
- Results from collective participation mechanisms, analysed over-time to demonstrate whether affected people’s concerns are being addressed
- HRP monitoring reports
- HCT, IC, Clusters meetings reports

ii. Evidence provided by organisations’ reports, proposals, planning and decision-making meetings, and M&E show that each proactively engages, prioritises and invests in collective mechanisms to collect and process feedback and complaints from affected people, including in relation to SEA.

**Proposed data source(s):**
- HRP
- Results from collective participation mechanisms, analysed over-time to demonstrate whether affected people’s concerns are being addressed
- HRP monitoring report
- HCT, IC, Clusters meetings reports
- Aid organisations’ programme plans, M&E reports and recommendations, records of operational meetings, funding proposals and reports.
- Triangulation of reports by aid organisations and analysis from collective participation mechanisms

iii. **Globally:**

iv. Number of humanitarian contexts with HRPs which operationalise commitments 4 and 5 of the CHS or IASC CAAP

**Proposed data source(s):**
- OCHA reports on HRPs
- P2P reports
- IAHE reports

---

\(^2\) Such as the HCT, the InterCluster, the Clusters, including their relating needs analysis, planning, monitoring and evaluation tools and mechanisms.
v. Number of humanitarian contexts with effective collective mechanisms to collect and process feedback and complaints from affected people, including in relation to SEA.

*Proposed data source(s):*
- IASC TT on AAP and PSEA reports
- Triangulation of reports by aid organisations

vi. Number of humanitarian contexts where community perception survey data are available and used in the decision-making process.

*Proposed data source(s):*
- IASC TT on AAP and PSEA reports
- Triangulation of reports by aid organisations

vii. Number of IAHE and RTE which show that affected people feel that they contribute to the design and implementation of the response and that feel listened to.

*Proposed data source(s):*
- Data point, affected people’s perspectives
- OCHA reports?

viii. Percentage of HRPs with safe, accessible and gender responsive mechanisms to collect and process feedback and complaints from crisis affected populations, including in relation to SEA/SH

*Proposed data source(s):*
- OCHA reports

ix. Percentage of HRPs that demonstrate that operational decision-making is informed by the views of affected people disaggregated by sex, age and vulnerabilities

*Proposed data source(s):*
- OCHA reports

x. Percentage of HRPs that integrate strategies/plans for the implementation of the IASC CAAC, PSEA commitments, Centrality of protection in humanitarian action, Gender Policy and its accountability framework

*Proposed data source(s):*
- OCHA reports

xi. # of programmatic and cluster level initiatives targeted at supporting participation of affected people, including women and local women’s organisations in decision making, monitoring and accountability of humanitarian response

*Proposed data source(s):*
- OCHA reports
- GCC reports
**Good practices to achieve collective commitments - donors:**

i) Donors require Humanitarian Response Plans to provide evidence of how affected people’s input has been considered in their development, how information about the response is being fed back to affected people, and for reporting on HRPs to provide evidence on how feedback from affected people is considered in all stages of the humanitarian programme cycle.

j) Donor funding and terms and conditions encourage humanitarian actors to engage in coordinated approaches to effective participation during program development, implementation and monitoring.

**Indicators**

Same indicators as those related to good practice a)

xii. Each donor funds country level collective mechanisms to collect and process feedback and complaints from affected people, including in relation to SEA, and makes it a requirement for organisations that they fund to demonstrate that they engage in such mechanisms.

*Proposed data source(s):*
Donor guidelines and reports

xiii. Donors adopt a common approach to fund country level collective mechanisms to collect and process feedback and complaints from affected people, including in relation to SEA, and to incentivise organisations’ participation in these mechanisms.

*Proposed data source(s):*
OCHA reports
Triangulation of aid organisations’ reports