

Minutes of the IASC AAP PSEA Task Team Meeting, 7 December 2017

1. Introduction

Tanya Axisa (Coordinator)

One of the Task Teams main objectives for this year is to find ways to integrate AAP into the humanitarian programme cycle (HPC) at a collective level in countries. A few months ago, we came together to look at how to do this through multi-sector needs assessments (MSNAs). Today, very happy to say 2 Humanitarian Needs Overviews (HNOs) (Whole of Syria and Ukraine) have just been released and include chapters on AAP due to the work of the Task Team. Today the focus will be on Ukraine and how we can learn from this pilot for next year's HNOs; with the hope that by next year, AAP and the views and perceptions of affected people will be included in all HNOs.

Thanks go to REACH who conducted the data collection exercise in Ukraine and have committed to include AAP questions in any future assessment that informs the HPC. Thanks to OCHA for making this happen with support from HQ to the HCT. Thanks to ALNAP for providing inputs into the menu of needs assessment questions for future use.

2. Background to IASC AAP/PSEA Work on Needs Assessments

Tanya Axisa (Coordinator)

In the summer, members of the Task Team came together to look at how we could integrate AAP into needs assessments and the group drafted some initial questions for the Ukraine MSNA. Following this, the Task Team was asked to host a Grand Bargain Needs Assessment workstream objective on AAP; this was a good opportunity for us to embed our work into something concrete. The group joined forces with members of the workstream for an initial meeting and developed some goals and outputs:

Goal: Incorporate views and perceptions of affected people about the response and the providers (misconduct including SEA) into HNOs.

Outputs: Over time the menu of AAP questions will be used in future MSNAs (led by REACH and other Needs Assessment Actors and UNHCR in their NARE) and shared with the Grand Bargain Participation Revolution who will advocate for their uptake. Lessons learnt and case studies from pilots and showcasing positive examples to encourage other HCTs to do the same. And finally, an ultimate output will be that core questions are identified and become mandatory.

Why is this important?

- Traditionally, we have used needs assessments to focus on needs, but there have been efforts over the last few years from AAP actors to look at using assessments to determine people's information and communications needs and preferences; but very few attempts to use the needs assessment as an actual feedback mechanism.
- Needs assessments can be used to get a broad representation giving us statistics on how people would prefer to receive information about the response, provide their feedback about the response and ultimately how they feel about the response (which is relatively new).
- This should not be seen as a way to replace complaints mechanisms or perception surveys; this is another way of finding out how large numbers of people feel about the response. This is also 'resource-light'; only involves adding a few questions into needs assessments that are occurring anyway.
- Ultimately, we can use needs assessments to find out about people's perceptions of the response, design AAP mechanisms (communications/participation strategies and complaints mechanisms) and adapt the mechanisms accordingly.

Discussion/comments:

- It is also important to find out about affected people's capacities and potential.
- Who would be the focal points for data collection and is there a mechanism for follow up with communities after the event? So far, the only organisation we have piloted this with is REACH who are present in a lot of protracted crises and have the specific goal of informing significant milestones such as the HNO but there are others. REACH will also lobby for other needs assessment actors to

include these crucial AAP questions whether leading assessments or contributing to them. In terms of feeding back to the communities, we need to discuss this as a group.

- How do we engage the communities in the design of the assessments? This is tricky as guidance on this already exists so we agreed to look at how to use the Grand Bargain Needs Assessment Code of Conduct to encourage participation from the start; although this is challenging - at what point do you start this?
- This is very important work and challenges the myth that it is really difficult to 'do' AAP; this is a good example of how to do this from the outset; this is useful, nimble and practical and the hope is that this becomes standard as we move forward.

3. Ukraine Pilot Project – Data Collection

Elisabeth Vikman (REACH)

Data collection process:

- The REACH assessment was specifically aimed at informing the HNO and HRP. The Task Team shared a list of questions including priority questions (to take into account limited space/time in the assessment) and to prevent an unnecessary burden on the affected populations.
- Assessment went ahead in September; focused on households in villages within 5 km from the contact line (separating Government and non-Government controlled areas) of Donetsk and Luhansk oblasts. Findings presented here are based on the data collected in the government controlled side of the contact line.
- Methodology: Household level data collection with a representative sample of 138 households per strata (4 strata in total in rural and urban areas) in both Donetsk and Luhansk. Note: confidence level of 90% and margin of error of 7% for each oblast.
- 5 questions included as below.

Key findings:

Questions	Findings
% of HHs satisfied with the humanitarian assistance they received in 2017	<ul style="list-style-type: none"> • Majority were partially/fully satisfied • Some variation between rural (more likely to be fully satisfied) and urban • Female Headed Households more likely to report satisfaction (although this needs to be 'unpacked')
Reasons for dissatisfaction (quality, quantity, type, timeliness etc.)	<ul style="list-style-type: none"> • Main reason was not having received sufficient quantity of assistance
Satisfaction with information received about the response	<ul style="list-style-type: none"> • 45% fully or partially satisfied • 23% felt that they did not receive enough information • Some variation between the oblasts and slight differences between rural/urban
% of HHs who felt they were consulted about the response	<ul style="list-style-type: none"> • Only 14% felt they had been consulted • Variations: more likely to have been consulted in rural area than urban
% of HHs aware of how/where to complain if wanted to	<ul style="list-style-type: none"> • Around half of the HHs were aware of how to complain/feedback

Note: Questions were only provided to REACH just before the data collection started so there was limited time to include more; this was a pilot project.

Lessons Learnt (from data collectors):

- The concept of 'humanitarian response' was not clearly understood by the affected people; 'humanitarian assistance' was. We need to do some thinking around this and how to make this relevant.
- It is key to make sure that we sample from different groups to capture important variations depending on population profiles; e.g. elderly, women, men etc. as the variations are definitely there.

- Respondents were quite surprised when asked about feedback/complaints mechanisms and in general showed limited interest in future communication with aid providers unless it was around receiving assistance. This could be related to the lack of understanding about the term 'humanitarian response'.

Discussion/comments:

- How much extra time was needed with the families to ask these questions? This is always a concern, but in this case as the questionnaire had already been finalised with the clusters etc., there wasn't the opportunity to add a lot of questions which is why the 5 were picked. However, it would be optimal to use open questions to receive qualitative information.
- Did the assessment only look at households that had received assistance or the broader spectrum of the population? The sample was of the population overall; this became apparent when the question around dissatisfaction was asked.
- Should we be cautious with the findings around consultation because in many cases even if you have a good understanding of what people's needs are this does not automatically imply that everyone will have been consulted. Should we re-think this approach? We need to think about the approach; should we do a sample of the population or should there be some other forum for people to input into.
- Is there anyway of comparing these findings with previous assessments? E.g. survey that was done prior to the World Humanitarian Summit (WHS) by IPSOS in Ukraine (in which it was found that half of the people did not access assistance because they didn't know about it). In terms of comparability, if we have these questions now, next time the assessment is asked, we can compare. So far, AAP questions are not consistently included in assessments so for the future we should be doing this. However, comparisons need to be representative of the same population; in the future we will need to have a sample that is representative of the same area.
- This is exciting; in terms of potential of the questions that can lead to better programming. Interested in unit of measurement; why are specifically focusing on households when we know that males and females and different age groups have different experiences of the assistance? The analysis needs to take into account gender and age. The analysis in this assessment was based on the household and as such the gender of head of household; however in order to get a big enough sample size of female headed household, a very large overall sample would be required, to ensure all groups are represented adequately. This requires help in lobbying for additional resources for needs assessment actors. However, in the meantime, instead of limiting the questions to the head of household could we make sure that 50% of men and 50% women are asked regardless of their status of head of household. Agreed that this would provide an opportunity for gender analysis; and to do this the sample would not have to be increased. To note: the findings shown here are only 'top-line' and the detailed findings will be available in the forthcoming MSNA report.
- In the questions, humanitarian assistance is seen as one thing but could mean a multitude of things; are there any plans to do more specific gender surveys which may highlight some particular issues (e.g. are women receiving menstrual items)? In this case, the aim was to ask about assistance 'overall'; a logical add-on would be to break this down by assistance types.
- Will the findings be shared in different languages to ensure everyone is aware of the findings? The MSNA report is being translated into Ukrainian.

4. Incorporation of findings in Ukraine HNO and barriers and opportunities

Meg Sattler (OCHA)

OCHA reflections:

- This is a great achievement; with thanks to REACH for piloting this.
- What made it into the HNO? Please see attached HNO document.
- Whilst this is short, this is a good start, especially as there are not many precedents for this. The HCT worked hard to get this into the HNO; and appreciated that there is a need to do more in terms of AAP. This also goes beyond the sectoral approach and could naturally pave the way for a collective AAP system such as the Communications and Community Engagement Initiative.
- This also shows that within Ukraine, there was buy-in from the HCT which lends itself more naturally for the HCT to come up with collective mechanisms.

- Independently of the assessment, there have been efforts in the HCT to strengthen AAP throughout the HNO document. This was launched today at the Palais. It is hoped that this has set a precedent and people will expect to see this in future HNOs.
- Some of the HNO section could have been strengthened; as this did not include the findings on satisfaction with the response and didn't cover all the findings but this was a strong start.
- In terms of process, this wasn't sustainable as the team on the ground were not expecting this information and it didn't have a natural home in the HNO so there was additional work for the team and OCHA Geneva. In future, we need to support HCTs to understand how to do this.
- There was some debate about whether this kind of information belonged in the HNO or HRP. For the HNO, it is good to see community priorities, information and communication preferences and information on how communities were involved in the assessment process. This would pave the way for information to go into the HRPs for planning and fundraising. This gives a good idea of the gaps in AAP that should improve our chances of obtaining funds quickly. The HRP would include details of how we would address the gaps.
- Under the accountability indicators for DFID's payment by results, programme documents (HNO and HRO) are specifically cited; in order to release DFID funding we need to increase the prevalence of AAP in these documents. SIDA will also likely be putting more pressure on us to do this.
- Next week there is a HPC planning meeting which will look at HNO/HRP templates and gaps etc. This could also be a chance to feed into this process. (Update that further feedback on the HNO/HRP process and templates will be solicited in January and there will be an opportunity to feed into this).
- In terms of giving feedback to affected communities on the results of assessments, we are not great at this at the collective level (translating documents is insufficient) but at Agency level this is happening. E.g. CCCM cluster members in Myanmar presented findings of a JIPs assessment back to the community in accessible ways. We can draw on some examples as we move forward.

Other HNOs: today a number were uploaded on <https://www.humanitarianresponse.info/>. Only very few have AAP; in:

- South Sudan, under the sector sections, has detail on information and communication preferences with a strong gender analysis – e.g. women receive information last etc. Also includes a community feedback section highlighting the work of Internews and local radio stations.
- Whole of Syria (which was supported by the Task Team); this is very strong and has a chapter on perceptions of assistance.

A precedent has now been made for future HNOs.

Discussion:

- What proportion of HNOs have AAP sections? The proportion is very small; under 20% but this improved exponentially this week. OCHA has to report on this to DFID; showing an increase year by year.
- Where is the home for this information? Which questions should be prioritised? Which questions will decision-makers find valuable and actually use to inform their decision-making processes? From an OCHA perspective, whilst the HNO and HRPs are not the 'be-all and end-all' of a response, they do have a role and once AAP is included in the documents this can naturally lead to some thinking around AAP systems etc. Some of the collective AAP response models will go a long way to addressing the issues. The issue is not necessarily the questions or documents but more about how we then measure what that means and intentionally get that feedback through the programme cycle; this has not been strong to date. Donors are about to ramp up questions around what we do with the feedback we receive from the AAP mechanisms.

5. Latest Menu of Needs Assessment Questions

Tanya Axisa (Coordinator)

A revised menu of AAP questions has been developed (see attachment) which can be used by organisations in their own needs assessments but ultimately is for piloting in future MSNAs. Of particular interest are the 'yellow' questions which represent direct feedback from the affected people. REACH and ALNAP have contributed to developing this set of questions based from the original version that was shared with the Task Team and lessons learnt from the Ukraine pilot. One of the recommended changes from ALNAP was to focus on open questions, if we are serious about AAP we should not be 'prompting'

answers from affected people but actively listening; this does however make it more difficult in terms of data collection and analysis and could have resource implications.

Discussion/comments:

- Agree with need to have open questions. Also agree that need to talk about 'assistance' instead of 'response'. Some confusion on the participation question - are questions 29 and 30 really about participation or could they be changed to read: were you able to influence the type, quality and quantity of assistance you would receive? Could refer to CHS questions.
- Priority questions: we would like to have 5/6 questions that would become core.
- Need to be clear that for questions 19, 24 and 27 which are about the behaviour of aid providers; when asking the questions SEA, corruption etc. should not be actually asked as this is very sensitive. PLEASE NOTE THAT THIS IS ONLY FOR GUIDANCE FOR THE ENUMERATORS. THE ATTACHED LIST HAS REMOVED THE PARENTHESES; PLEASE USE THE 'CLEAN' VERSION.
- What could help frame the question on assistance is to frame what type of assistance we are talking about. The way you ask these questions will differ.
- Instead of saying people's challenges, at the very least, to help us recognise diversity, instead of saying 'people' we should talk about 'men, women, boys and girls'.
- Are managers being asked about what they are doing about this? How does this reflect how we deal with managers and how they make decisions about the aid? This is less about the questions we ask and more about how we include affected people in decision making and how we engage. We need to acknowledge that there are different types of engagement and involvement and need to shift our power to the affected populations as an ultimate goal over time.
- The Red Cross/Crescent has developed a tool for national societies for monitoring and assessment. There is one set of questions that looks at community participation and community decision-making processes (i.e. their own; not ours); this would give us a useful and different perspective and would challenge our normal point of departure of assuming affected people should be part of our processes. This is in the narrative of the Grand Bargain; we need to make this shift to how we can be part of affected people's decision making.

Actions:

- This has already gone through a consultation process within the Task Team but if anyone has any additional ideas/questions for the menu please share with Tanya.
- If anyone has ideas around which questions should be core/priority please get back to Tanya.

AOB

Update from CDAC/IASC AAP/PSEA Task Team Resources Workshop

(Tanya Axisa, Coordinator)

The workshop was held on 30 November; we had a good turnout – thanks to everyone who participated. The aim was to simplify the task of searching through multiple resources and develop a 'short-list' of tools, guidance and case studies for field staff. The group categorised resources against the revised CAAP (commitments on AAP) of Leadership, Partnership and Participation, Information, Feedback and Action and Results and further divided into whether they were useful at the organisational or collective levels or both. The day was spent in group work and a final debate to agree on the list. The list will be used to accompany the CAAP guidance note (in process) and for the Sphere handbook revision (through the CHS Alliance) as a resource guide.

Next steps: The participants will feedback on the matrix. It will then be shared with the Task Team.

Update on potential CCE Initiative

(Charles-Antoine Hofmann, UNICEF)

We are hopeful that the matrix developed from the workshop (above) could feed into a potential new initiative being considered. A decision has not been made yet but the CCEI is looking into developing a platform for tools and guidance in recognition that field practitioners are struggling with the multitude of resources. The idea is to link an initiative to existing fora (CDAC, IASC etc.) and develop an online platform that 'tags' resources according to their use and different contexts. In addition, this could introduce a feedback mechanism within the system to that the resources could be rated. It would need to have the

right resources in place to maintain this as a system. As a first step, a survey is being considered to see what tools practitioners etc. are using and what their needs are. Following this, a small group will be established and a mapping exercise will be undertaken to take into account other platforms (e.g. ALNAP).

Update on Helpdesk

(Tanya Axisa, Coordinator)

Since the poster was circulated we have had some questions in to the helpdesk. With thanks to all for sharing with their field teams. Please also share with local partners if you haven't already. If anyone can translate the posters please let Tanya know.

Update on revised CAAP

(Tanya Axisa, Coordinator)

The revised CAAP were endorsed by the IASC Principals on 20 November. The co-chairs will send out an official email to the Task Team. Next steps: A draft guidance note has been prepared. This incorporates relevant recommendations from the Core Humanitarian Standard and the Grand Bargain Participation Revolution rather than creating a parallel set of recommendations. In addition, both documents have already been endorsed so we should be able to avoid a lengthy consultation process. If anyone has any objections around this approach please let Tanya know. Next steps: Tanya to circulate draft guidance note for quick turnaround.

6. Next Meeting

- PSEA specific meeting: Thursday 25 January 2018 3pm
- Next AAP PSEA meeting: Thursday 8 February 2018 3pm

List of Participants

Organisation	Name
IASC AAP PSEA	Tanya Axisa
ALNAP	Alice Obrecht
CHS Alliance	Genevieve Cyvoct
Church of Sweden	Ester Dross
FAO	Bruna Bambini
GENCAP	Merrin Waterhouse
GPPI	Mark
GPPI	Andras Derzi-Horvath
IASC	Finn Stallbaum
Independent	Linda Poteat
IFRC	Tina Tinde
IFRC	Ombretta Baggio
IFRC	Isabel Low
IMC	Michael Gall
Interaction	Caroline Nichols
IRC	Trisha Garbe
IRC	Marie-Emilie Dozin
Johanniter	Dr Inez Kipfer-Didavi
LWF	Alan Calma
OCHA	Kimberly Lietz
OCHA	Meghan Sattler
REACH	Elisabeth Vikman
UNHCR	Michelle Ndhlovu
UNICEF	Philimon Majwa
UNICEF	Charles-Antoine Hofmann
WHO	Louise Atkins
WFP	Marina Angeloni