

## STUDY BRIEF

# Pan-India Study on the Existing Mechanisms of Ensuring Accountability to the Affected Population in India



## BACKGROUND

|   |  |
|---|--|
| <p><b>What does Accountability to the Affected Population mean?</b></p> | <ul style="list-style-type: none"> <li>The Accountability to Affected Populations (AAP) Framework articulates how to use power responsibly by taking account of, and being held accountable to, those who are affected by the use of such power” (ICRC 2019)</li> <li>The term "Accountability to Affected Populations (AAP) combines a large and growing number of activities related to regulating the relationships and power imbalances between people affected by crisis and humanitarian agencies." (ALNAP 2018)</li> <li>It also means, “taking account of the views of affected people in the design and implementation of aid activities and collecting and acting upon feedback from them, giving account by transparently and effectively sharing information with communities, and being held to account for the quality, fairness and effectiveness of their actions”. (GCER 2016)</li> <li>“Accountability is key in ensuring that responses are tailored to communities and enhances their dignity as well as helping to restore their lives” (Start Network 2017)</li> </ul> |
| <p><b>What was the study context?</b></p>                               | <ul style="list-style-type: none"> <li>This study focused on three multi-hazard prone states of India (Assam, Kerala and Odisha)</li> <li>Caritas India, Christian aid, Save the Children and Islamic Relief have been responding to various disasters in these states.</li> <li>This study specifically focuses on the 2017-18 flood response in Assam and Kerala and 2019 response of cyclone Fani in Odisha and assesses AAP mechanism adopted by these agencies.</li> <li>This study covers six locations from three hazard-prone Indian states that are vulnerable to annual flooding, viz. Assam (Dhemaji and Lakhimpur District), Kerala (Wayanad and Alappuzha) and Odisha (Bhramgiri and Puri).</li> </ul>  |
| <p><b>What was the study purpose?</b></p>                               | <p>The study on the existing mechanisms of ensuring accountability to the affected populations (AAP) in India was conducted to identify good practices, gaps and lessons to strengthen AAP during disaster response activities of humanitarian agencies.</p>   |
| <p><b>Who conducted the study?</b></p>                                  | <p>The study was conducted by the All India Disaster Mitigation Institute (AIDMI), which has longstanding experience of conducting large-scale community feedback studies in the aftermath of 2001 Gujarat Earthquake and 2004 Indian Ocean Tsunami for Disaster Emergency Committee as well as for the Tsunami Evaluation Coalition (TEC) of ALNAP in India, Indonesia and Sri Lanka.</p>   |
| <p><b>How was the study conducted?</b></p>                              | <p>The study methodology included review of literature, field missions (FGDs), KIIs and state and national level workshops. The consortium of humanitarian agencies whose response mechanisms were analysed for the purposes of this study included four INGOs namely Caritas India, Save the Children, Christian Aid and Islamic Relief and their nine partners; six international reference group; and three subnational and one national Inter Agency consultations. This study is hinged on calibrating the aforementioned responses against the 9 commitments of the Core Humanitarian Standards (CHS) on quality and accountability.</p>   |

## WHAT DID THE STUDY SAY ABOUT PERFORMANCE OF VARIOUS HUMANITARIAN ACTORS IN ENSURING AAP?

| Key findings                                      | Strengths   | Opportunities  |
|---|---|--|
| <p><b>CHS1. Appropriateness and relevance</b></p> | <p>Agencies and their response have evolved over time and are now more sensitive to the issues of accountability and transparency.</p>  | <p>Influence at the government and Corporate level require to focus on the affected population. They both need better understanding about “Who is affected and Why”</p>  |
| <p><b>CHS2. Access and timeliness</b></p>         | <p>Agencies always make efforts to provide timely relief. But quality of relief differs from agency to agency and in different contexts. Rapid Joint Needs Assessments (JRNA) and IAG mechanism for coordination within and with government are useful in reducing response time.</p> | <p>Agencies need to have a plan to procure goods and services locally in advance for each state. “If vendors and transporters in humanitarian action are properly told about whom these items are meant for then they would act more responsibly with their duties”, Mr. Deba Prasad Sarma from Save the Children.</p> |

| Key findings   | Strengths   | Opportunities   |
|--|---|---|
| <b>CHS3. Do not harm and reduce risk</b>                               | Response activities of the consortium and its partners have not harmed any community, household or individuals. Agencies have been successful in addressing immediate risks through short-term responses such as risk of heatwave, epidemics, sexual abuse and human trafficking, including issues of child protection and abuse.   | It is difficult to address root causes of vulnerability and building resilience, especially for short-term relief-oriented emergency responses. Thus, such interventions must have a strong advocacy component for building resilience.   |
| <b>CHS4. Access to information and participation</b>                   | A right-based approach is embedded in all relief frameworks, standards and agencies, which are applied very carefully. However, the divergence in allocating entitlements has a huge variance: for first relief in Kerala a family received 10,000 rupees; while in Odisha, a family received only INR 2,000. For a destroyed house in Kerala, INR 4 lakhs was provided; while in Odisha, it is 95,000 rupees. Why such divergence? | A dedicated information campaign about rights and entitlements of victims (from both government and agencies should be designed to complement relief and recovery efforts of agencies. Panchayats in rural areas and Municipalities in urban areas are not adequately involved and capacitated to provide real-time and accurate information about relief packages and government resolutions or decisions. |
| <b>CHS5. Safe and responsive complaints mechanism</b>                  | Complaint mechanisms put in place by agencies are found quite effective. Everybody knew about them and those who had complaint used it. Agencies have made such mechanism simple, safe and responsive.  | Not all complaints can be resolved or resolved immediately. These complaints can either be closed after discussed with communities or should be forwarded to suitable stakeholder or authority. Government AAP and feedback and complaints from affected to government need attention.  |
| <b>CHS6. Coordinated and complementary assistance</b>                  | Emergency relief and responses are coordinated with the Government (both at state and local levels) as well as within NGOs (at national and state levels) to avoid duplication of efforts. Government-NGO coordination meetings and IAG mechanism are useful instruments for harmonizing responses.   | Greater awareness on AAP at different levels and, potentially, greater harmonisation of the policies and practices of government and each agency is needed, but also a willingness to deliver programmes in a way that reinforces collective commitments to accountability.   |
| <b>CHS7. Learning and reflection</b>                                   | Agencies have employed dedicated persons for organisational learning, which improves aid delivery and accountability of humanitarian response. Specific audit and reporting requirements are also encouraging agencies to institutionalize learning.  | The best way to be accountable is to empower the local front-line home-grown humanitarian players through a dignified partnership rather than a mere implementing agency. Learning should also be institutionalized in systems and processes of local partners.   |
| <b>CHS8. Competent &amp; well-managed teams</b>                        | Agencies have invested in empowering staff and volunteers through trainings and participation of locals in agency processes have built capacities at the village levels.  | Frequent training is required at the field level for the field staff to make them understand the concept of accountability to the affected population clearly, right from targeting the community till response and evaluation.   |
| <b>CHS9. managing resources effectively, efficiently and ethically</b> | INGOs and their partners are made accountable by both donors and government. Government GR and other information is shared with the civil society and the private sector on regular basis.  | Unified Standard Operating Procedures (SOPs) on AAP was suggested. Various agencies involved in providing humanitarian assistance should adopt a unified SOP for AAP. SOPs (for rapid procurement, packing, transportation, storage and distribution of relief items) are important to ensure minimum standards of relief and speedy management of supplies.  |

## WHAT ACTIONS WERE RECOMMENDED?

The study recommended that humanitarian actors should:

| CHS  | Key recommendations   |
|--|---|
| <b>CHS 1. Appropriateness and relevance</b>            | <ul style="list-style-type: none"> <li>Design a systematic needs assessment method and procedure to mobilise greater participation of women and other vulnerable groups such as PWD, aged, trans-gender individuals in partnership with local governing bodies such as Panchayats and Urban Local Bodies.</li> <li>Response strategies need to be accountability oriented at government level; CSOs must advocate for the inclusion of AAP mechanisms in existing policies and plans, i.e. inclusion of AAP mechanisms in the existing Disaster Management Plans. There is a lack of knowledge around affected communities' understanding of AAP.</li> </ul>  |
| <b>CHS 2. Access and timeliness</b>                    | <ul style="list-style-type: none"> <li>Recognize the differential impact of disasters on different people, prioritizing the needs of the most vulnerable which include PWD, Women Headed households, fisherfolk, slum dwellers, artisans, casual labourers, scheduled caste communities, migrants, and people living in extreme poverty.</li> <li>Timely response requires a mature relationship with local governing bodies such as PRIs/ULBs and all efforts should be made to establish such relationships on a priority basis. As a representative body of the people, PRIs/ULBs are accountable to the people of the ward, rural community, block and the district and are most appropriate institutions for people's participation.</li> </ul>  |
| <b>CHS 3. Do not harm and reduce risk</b>              | <ul style="list-style-type: none"> <li>Monsoon and cyclone preparedness activities should be institutionalised along with a joint review (by IAG) of state preparedness every year.</li> <li>AAP starts before population gets affected. Risk Reduction efforts are important and AAP should be part of DRR. Pre DRR actions should be documented, reported and to be brought into Accountability Framework.</li> </ul>   |
| <b>CHS 4. Access to information and participation</b>  | <ul style="list-style-type: none"> <li>Make dedicated effort to inform communities about government efforts and facilitate their access to decision making. There is a need to develop an aid principle based on the right 'to seek, receive and impart information' as mentioned in the 134 Article 19 of the Universal Declaration of Human Rights. It would imply a responsibility to inform affected people in an accessible language.</li> <li>There is an urgent need to convert Core Humanitarian Standard (CHS) into actions and practices in the Indian context.</li> <li>Agencies need to develop a common agenda for AAP in India. Laws which can support accountability, need to be linked with responses to inform and sensitise government. Invest in raising local Dalit and Tribal leadership and bring them together to dialogue with the humanitarian stakeholders and create ample space and platforms for AAP.</li> </ul> |
| <b>CHS 5. Safe and responsive complaints mechanism</b> | <ul style="list-style-type: none"> <li>Assuming that the consortium will continue to work in these areas, it is recommended that complaint mechanism should go beyond relief distributions as an ongoing feature of the response with well-defined timeframe for response.</li> <li>Humanitarian Accountability mechanisms should not just be limited to the emergency phase but mainstreamed through all sectors and all phases of the programme/project cycle. Agencies should consult with communities on the suitable mechanism post their exit.</li> <li>Apart from a compliant mechanism, other systems of registering feedback and complaints are necessary, especially in areas where the literacy rate is very low. In Bangladesh, on an experimental basis, voice recorders were installed in a refugee camp in Cox's Bazar and the results were very encouraging.</li> </ul>   |
| <b>CHS 6. Coordinated and complementary assistance</b> | <ul style="list-style-type: none"> <li>Unified Response System (URS) matrix could be more useful to coordinate efforts and avoid duplication if maintained online. An online system can be devised to add more features and simplicity, including analysis to guide agencies to take decisions in real-time.</li> <li>Use of modern technology e.g. mobile phone and social media can be institutionalized in feedback and complaint mechanisms. Use of WhatsApp has made things more transparent.</li> <li>Inter-Agency Group (IAG) members should or can make a public commitment to a common minimum agreed standard of AAP.</li> </ul>  |
| <b>CHS 7. Learning and reflection</b>                  | <ul style="list-style-type: none"> <li>Peer-learning for leveraging each other's expertise in specific sectors and use of technology, including social media is needed. IAG is an appropriate forum to facilitate such exchanges. A south-south learning event should be organized for wider-learning and exchange.</li> <li>Existing Government-NGO networks and mechanisms at national and states level to support AAP practice need to be strengthened through regular reviews and evaluations.</li> <li>Good practices for AAP used by the implementing CBO/NGOs need to be captured and shared across agencies and states in India.</li> </ul>   |

| CHS   | Key recommendations   |
|---|---|
| <b>CHS 8. Competent &amp; well-managed teams</b>                        | <ul style="list-style-type: none"> <li>• Ensure that the staff works according to the mandate and policies of organization and build capacity of local partners on AAP requirements in-terms of both, process and outcomes.</li> <li>• The role of local government in AAP in projects implemented by CSOs needs to be properly defined.</li> <li>• Empower the local front-line home-grown humanitarian players through a dignified partnership rather than a mere implementing agency.</li> </ul>   |
| <b>CHS 9. managing resources effectively, efficiently and ethically</b> | <ul style="list-style-type: none"> <li>• Identify opportunities to reduce the carbon footprint of relief and work towards lower carbon footprints in WASH, Livelihoods and shelter related interventions (Green AAP).</li> <li>• Operationalization of AAP in humanitarian response should build on existing policy guidance, tools and methods that inform and strengthen accountability to affected populations. These include gender equality programming, prevention of sexual abuse and exploitation measures, equity and human-rights-based approaches to programming and humanitarian performance monitoring tools.</li> <li>• Agencies should develop standard operating procedures for AAP and develop common minimum package for relief items that are commonly required across communities and locations.</li> <li>• Designing humanitarian programs in compliance to accountability mechanisms are costly, especially in difficult to reach areas. The costs of reaching out to a few people will be more!</li> </ul> |

Furthermore, a compendium of good practice working guidelines on AAP has also been developed as a part of the study to serve as a tool for agencies to adapt and institutionalize in a given context. These include:

#### GOOD PRACTICE WORKING GUIDELINES

1. Locate/identify and explain accountability to affected populations in the humanitarian context as soon as the action starts.
2. Find ways to institutionalise accountability to affected population into policy, strategy, operations, plans (location and sectors), projects and programmes, structures and systems, and outreach before action.
3. Plan and design accountability to affected populations in projects/events, including in hazard assessment, risk analysis, geospatial efforts, and Project Cycle Management (PCM) including fund mobilization.
4. Identify and engage partners and stakeholders for accountability to affected populations including governance, CSOs, DRR networks, armed forces and regional initiatives on Trans-Boundary Early Warning System.
5. Transform accountability to affected population as inclusive exercise, including gender equality, women's leadership, older citizens, Dalits, minorities, tribal citizens, children disabled, casual labour, migrants and foreigners.
6. Invest in and deepen community level AAP and promote participation at all levels.
7. Recognize and use indigenous ways of holding accountability to affected populations through Gram Sabhas, including the limitations of such local ways.
8. Use technology, IEC, Social Media, AI and digital methods for accountability to affected populations.
9. Promote accountability to affected populations in government (National Institute of Disaster Management (NIDM), National Disaster Management Authority (NDMA), Ministry of Home Affairs (MoHA), and State Disaster Management Authorities (SDMAs) policy, regulations, and operational efforts.
10. Ensure adequate economic and financial resources for accountability to affected populations by lobbying with donors and including cost for accountability in proposals.
11. Plan accountability to affected populations in cities and towns. Slums remain difficult to work with and are often neglected in relief and responses.
12. Design accountability to affected populations for slow on set disasters and emergencies such as droughts.
13. Review impact of accountability to affected populations after humanitarian action need to be institutionalized in both public and private responses.
14. Monitor and evaluate accountability to affected populations. Real time, ongoing, and iterative.

#### CONCLUDING REMARKS

Humanitarian assistance is the right of the affected populations. Right to life with dignity includes right to humanitarian assistance. The study has found strong commitment and good progress made in the areas of AAP by the consortium members. Since agencies have been able to institutionalise the concept of AAP, the concept seems to be better defined and understood. Agencies have also shown willingness to improve AAP in each response by placing victims at the centre of relief and response activities. The next step is to make AAP systematic and systemwide in a federative and collaborative manner. Systems and processes of AAP cannot perform immediately in the wake of a disaster if not planned in advance.