Guidance: Dedicated AAP funding envelope
CERF Underfunded Emergencies Window: 2024-I
April 2024

Background

1. In all its allocations, CERF works with RC/HCs and implementing agencies to **ensure that measures are being taken to be accountable to the people we serve**. In line with the IASC Revised Commitments on Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse, CERF tracks the fulfillment of Commitments 2 (Participation and Partnership) and 3 (Information, Feedback and Action). In all applications for funding, CERF requires organizations to demonstrate that diverse groups[1] of affected people are directly consulted on project development, their feedback is considered during project design and implementation, and they are involved in project implementation and monitoring. CERF also requires agencies to demonstrate how they implement confidential, accessible, and inclusive feedback and referral mechanisms during the project implementation period. In addition to project-level AAP requirements, RC/HCs are also asked to explain in all CERF submissions how existing collective AAP systems and processes in-country are used to support CERF allocation strategies and priorities, and to detail what collective AAP mechanisms are in place, how CERF-funded projects link up to the mechanisms and how consultations with affected people inform the development of the allocation strategy and the implementation and monitoring.

2. In addition to these actions, and as part of this Underfunded Emergencies allocation (UFE) round, **the ERC has decided to commit for the second time an additional dedicated funding envelope, of $3-$4 million, to help strengthen collective AAP measures** in select UFE-recipient country-operations. This amount will be in addition to the regular UFE funding envelope. The overarching objective of the dedicated AAP allocation is to empower affected people, including persons with specific needs and the most vulnerable, to continuously and effectively shape humanitarian decision-making, by supporting and engaging them, and the organizations that represent them, as equal partners, taking into consideration the guidance provided by the IASC Collective AAP Framework[2]. The dedicated funding envelope aims to do this by directly supporting sustainable initiatives that will enhance collective[3] AAP practices and processes in the humanitarian operations supported.

3. **Applying for funds from the AAP envelope is optional**, and RC/HCs in each UFE recipient country, in consultations with relevant partners, decide whether to develop and submit an AAP proposal for consideration under this special envelope. However, if the RC/HC decides to not apply for the AAP envelope, the country operation will still need to fill the first part of the template and submit it with the strategic prioritization document. Even **if an AAP proposal is submitted, funds are not guaranteed** as the overall available amount is limited and funding may have to be prioritized for the strongest proposals that best meet the established criteria.

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[1] In this sense, diverse groups mean men, women, boys, girls, persons with specific needs (including persons with disabilities), at-risk and marginalized people in the communities, as well as community leaders and religious leaders, where the case.

[2] The IASC Collective AAP Framework can be found here: https://interagencystandingcommittee.org/iasc-task-force-2-accountability-affected-people/iasc-collective-aap-framework.

[3] For the intents and purposes of this document, collective AAP mechanisms are understood as response-wide mechanisms that bring together multiple humanitarian actors, including local and national actors, to strengthen engagement with and accountability to affected people. Collective AAP practice and approaches refers to the use of such mechanisms in the country operation.

Process

4. If it is decided to submit proposal for consideration under the designated AAP funding envelope, **the RC/HC should:**

   a. **Consult the AAP working group or equivalent coordination structure**[4] (including the AAP focal point in OCHA), to ensure that the CERF-funded activities address AAP needs at the whole-of-response level rather than just at the level of agency or sector response.

   b. **Ensure that the HCT is consulted and supports the proposed use of the AAP funds.** AAP must also be a key dimension of the strategy for the 'regular' CERF UFE allocation, and the dedicated AAP proposal should be considered as part of the overall UFE discussions.

   c. **Prepare a submission consisting of a strategy that describes the proposed AAP initiative and its rationale,** including how it meets the criteria outlined in paragraph 5 below using the separate CERF template. At a later stage, if the ERC approves the AAP strategy for funding, develop a project proposal in the dedicated CERF project template.

   d. **RC/HCs should oversee the AAP project activities** either through the HCT or by establishing a dedicated project steering group (e.g., the AAP working group or designated steering group) that also leads on learning**.**

Project Criteria & Eligible Activities

5. **The additional CERF AAP funds are not guaranteed as funds are limited. Only AAP strategies and projects that meet the following minimum criteria and principles will be considered eligible for funding:**

   a. Have been **consulted** with the AAP working group or equivalent coordination body, the HCT and other relevant partners.

   b. Support **collective** AAP initiatives that benefit and improve the humanitarian response at large in the country (no single-agency or sector AAP), build upon existing structures and mechanisms as relevant, and comply with existing IASC guidance, including the IASC Operational Guidance on Data Responsibility in Humanitarian Action[5]

   c. Be **catalytic** in launching or piloting new or enhanced AAP initiatives that will strengthen collective AAP going forward (funds should not be used to fund existing AAP activities)

   d. Demonstrate **sustainability** beyond the CERF-funded project period. Sustainability is of crucial importance, as **CERF will not fund projects without a clear path to continued funding** after the CERF funding elapses. The strategy must include an explanation of how the country team will sustain the AAP initiative after the CERF funding runs out.

   e. Provide **realistic indicators**, contextualized and informed by the list provided in the Annex of this guidance (Note: projects pursuing collective AAP approaches MUST include two or more of the mandatory collective AAP indicators #1-10).

   f. Be accompanied by an HCT **commitment to learning** from the initiative and to sharing this learning, including making any software developed available as a Digital Public Good

   g. Be focused on a **few impactful activities**, with the expectation of a single project implemented by one agency on behalf of the wider humanitarian community.

   h. Have an **implementation period** for CERF funds of no more than 12 months.

   i. Be focused and strategic with a **high return on investment, and limited budgets**.

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[4] These can take different names in different contexts, such as AAP Working Group, Communication and Community Engagement Working Group or Taskforce, Community Engagement and Accountability Working Group , amongst others.

[5] https://interagencystandingcommittee.org/operational-response/iasc-operational-guidance-data-responsibility-humanitarian-action

6. **Considering the objectives and criteria set out for the allocation, the following four areas of AAP-related activities have been pre-identified as suitable for support in principle**, on the condition that CERF funds can serve as a catalyst for advancing sustainable initiatives within these areas. RC/HC/HCTs may also propose other impactful collective AAP activities that meet the criteria set out above. Activities are not guaranteed CERF support as this ultimately depends on approval by the ERC, informed by a technical review and assessment. CERF is providing a list of indicators annexed to this document, that agencies will consult and use in their submissions, in order to obtain a unitary AAP programming practice.

   i. **Establishment/improvement of collective feedback mechanisms that support/are linked to decision-making.** Establish and promote collective response-wide mechanisms for affected people for grievances, redress, complaint, feedback and information provision[6]. These mechanisms comprise multiple feedback intake channels tailored to the context, including face-to-face ones to ensure that every vulnerable group has a way to provide feedback. Additionally, they ensure that feedback is acted upon in a timely and appropriate manner, referrals are made securely and effectively, complaints are addressed promptly, and information collected from affected people is used to inform decisions and actions in the response, including course correctors, so that programming is adjusted, and the feedback loop is closed. Support is conditioned on feedback mechanisms being at the whole of response level, their design being led by affected people's preferences and in compliance with the IASC Community Feedback Operating Guiding Principles and Data Standards, and that the HCT/UNCT commits to actively pursue and guarantee resources to continue funding the mechanism sustainably after the CERF funding has lapsed. CERF funds should not be used to fund ongoing activities but might be considered for the implementation of catalytic improvements to existing mechanisms. Evidence should be provided to demonstrate that consideration has been given to relevant existing mechanisms and building upon them, including in relation to Gender, PSEA, Protection and Inclusion. If necessary for the delivery of the project, the agency may include IM-related activities for example dashboard creation, integrated databases, etc.), but they should not form the focus of the project and budget.

   ii. **Activities/systems that support the identification and inclusion of minorities/marginalized groups.** Targeted activities and systems for identification and inclusion of minorities and marginalized people and groups for equal access to humanitarian assistance (e.g., elderly, people with disabilities and others excluded due to physical, cultural, or other reasons and therefore not able to access assistance equally). Potential initiatives shall benefit the wider humanitarian response (not only an individual project/agency) and should provide evidence of links with existing mechanisms for PSEA, Gender, Protection and Inclusion.

   iii. **Activities that improve people's access to information.** Targeted activities and systems that enhance information provision to, and promote closing the feedback loop with communities[7], including in local languages and via affected people's preferred channels. This cannot be a stand-alone one-off activity but should aim to lead to sustainable collective approaches for systematic provision of life-saving information to affected people in support of a more effective and accountable humanitarian response.

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[6] To help ensure that affected people have safe, inclusive and readily available closed-loop feedback channels to request information or assistance, to assess and comment on the performance of humanitarian action, as well as to make complaints about any issue, including sensitive topics such as security, protection, gender-based violence, sexual exploitation and abuse, fraud, corruption, racism and discrimination, environmental violations, and others.

[7] E.g., joint projects with local media, civil society, community radio (where communities access information via radio), SMS-based information dissemination systems, or dedicated information kiosks in displacement camps or local community centers etc.

iv. **Initiatives that systematically gather and evaluate community perceptions,** such as systematic independent perception surveys and joint assessments and reviews to assess the extent to which affected people's needs are being responded to through humanitarian action; and to inform discussions and decisions at the HCT and ICCG. The CERF AAP funds should not be used to cover existing initiatives, or fund stand-alone one-off activities. Focus should be on new initiatives to establish sustainable systems for collective use of these tools or data to improve the humanitarian response[8]. It is strongly recommended that any perception surveys, assessments and reviews should be followed by joint aggregation and analysis of data to inform strategic discussions and follow-up actions within the life cycle of the project implementation. The perception surveys, assessments and reviews should not constitute the main focus of the project.

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[8] Ideally, these initiatives will also help gauge affected people's perception of the humanitarian assistance funded through this CERF UFE round.

Annex 1 – 2024 CERF Standard AAP Indicator Catalogue

How to use this catalogue	• This catalogue represents a menu of **mandatory and suggested standard indicators for CERF AAP Projects.** Applicant organisations are not required to use all the indicators, but to select those that best fit their project. • It is strongly recommended that these indicators are used exactly as they appear in this list to facilitate standardised scoring and aggregation of project data. Modification of these indicators and inclusion of additional custom indicators should be considered only when justified, informed by specific operational context.	
Theme/Category	**Indicators**	
Mandatory collective AAP indicators	**Collective operational approaches - mandatory** **Agencies submitting a collective AAP project <u>MUST include</u> two or more of the indicators in this section (#1-10)** in the Results Framework. **Use of these indicators should be prioritized** over the elective AAP indicators listed further below.	
Overarching	1	The response regularly brings joint aggregation of feedback trends to decision-making fora (HCT, ICCG, Clusters) – please rate on a scale of 0 to 5 0= There is no collation or analysis of feedback trends at any level. 1= Feedback is occasionally aggregated or discussed for decision-making fora on specific issues and/or on ad-hoc requests. 2= Feedback is aggregated from certain sources but not consistently and without interagency analysis or publication. 3= There's some regular collation of feedback from various sources and interagency analysis, but no publication or discussion. 4= Feedback from various sources is regularly collated, analysed at the interagency level, and occasionally published or discussed. 5= Feedback from various sources is regularly collated, analysed at the interagency level, published and discussed as a regular agenda item for identification of feedback trends and insights.
Overarching	2	Actions are taken to adapt the response based on the joint aggregated feedback presented to decision-making fora (HCT, ICCG, Clusters) – please rate on a scale of 0 to 5 0= No action is ever taken to adapt the response based on the joint aggregated feedback presented to decision-making *fora* 1 = Actions are taken to adapt the response but cannot be directly linked to the presentations of joint aggregated data to decision-making *fora* 2= Actions are taken to adapt the response based on the presentations of joint aggregated data to decision-making *fora*, but in an ad-hoc manner and without tracking 3 = Actions appear to be taken only at individual cluster level, but there is no follow-up/documentation and no systematic return to affected people to communicate about actions taken 4 = Actions are regularly and systematically taken to adapt the response based on the joint aggregated feedback presented to decision-making *fora*, and there is a tracking system for recording them, but there is no systematic return to affected people to communicate about actions taken 5 = Actions are regularly and systematically taken to adapt the response based on the joint aggregated feedback presented to decision-making *fora*, there is a tracking system for recording them, and a systematic process and mechanisms for returning to affected people to communicate about actions taken
Collective Feedback Mechanisms (CFMs)	3	% of affected people consulted who state that they know how to raise feedback about the aid they receive.
	4	% of affected people consulted who state that they have safe access to CFM information and feedback channels.
	5	Number of affected people (across age, gender and diversity factors) consulted about the CFM design
	6	Number of staff provided with an induction training on the CFM
	7	% of CFM users consulted who state that their feedback was addressed in a timely and appropriate manner
	8	% of received feedback items that were resolved (feedback items' resolution refers to response provided in a timely manner, and satisfaction of complainant)

Inclusion & Participation	9	Number of persons with specific needs (the elderly, minority groups, persons with disability) reached through direct consultations on the humanitarian assistance.
	10	Number of men, women, boys and girls reached through direct consultations on the humanitarian assistance (indicator target and achieved value should be sex and age disaggregated).
Elective AAP indicators		**Collective operational approaches - elective** **Agencies submitting a collective AAP project are <u>encouraged</u> to use the following additional elective indicators (#11-54) as relevant, in addition to the ten mandatory indicators, in the Results Framework of their AAP project.** **Agencies should not use custom indicators unless strongly justified.**
Overarching		**Response adaptation**
	11	A systematic process exists for assessing/tracking actions resulting from aggregated feedback (Yes/No)
		**Coordination**
	12	Number of existing or newly established AAP-focused inter-agency coordination structures
	13	Number of existing or newly established AAP-focused inter-agency coordination structures at sub-national level
	14	Number of staff dedicated to inter-agency AAP coordination at national and sub-national levels
		**Capacity Building**
	15	Number of inter-agency trainings on AAP conducted
	16	Number of affected people (across age, gender, and diversity factors) who participated in AAP trainings
	17	Number of **new** training packages/materials developed
		**Quality of assistance**
	18	% of affected people consulted (across age, gender, and diversity factors) who state that the assistance provided to them was of appropriate quality to meet their needs
	19	% of affected people consulted (across age, gender, and diversity factors) who state that they were able to access humanitarian assistance and services in a safe, accessible, accountable, and participatory manner
	20	% of affected people consulted (across age, gender, and diversity factors) who state that they know their rights and entitlements
	21	% of affected people reached (across age, gender, and diversity factors) who state that they were consulted about the humanitarian response
		**Learning and documentation**
	22	Number of project-related learning and documentation products developed
	23	Number of open-source tools and/or systems developed and shared
		**Funding**
	24	% of funding allocated to women-led organisations during this project
	25	% of funding allocated to national and local partners during this cycle

CFMs		Community engagement		
	26	Number of groups and/or local civil society actors consulted about the CFM design		
	27	Number of CFM awareness-raising sessions conducted with people across age, gender and diversity factors		
	28	Number of community committees or equivalent established to facilitate two-way communication of feedback		
		Awareness, information, and communication		
	29	% of affected people consulted who state that they are able to access information and communicate in an appropriate format and language		
		Access and safety		
	30	% of affected people consulted who stated that they are satisfied with their interaction with CFM		
	31	% of affected people consulted who state that they feel safe when using the CFM		
	32	% of affected people consulted who state that they feel safe to report cases of abuse, mistreatment, or harassment by humanitarian staff		
		CFM capacity building		
	33	Number of refresher trainings conducted on the CFM		
	34	CFM staff trained on their roles and responsibilities		
		Volume		
	35	% of feedback received across different localities (disaggregated by age, gender or other diversity characteristics)		
	36	Number of feedback received across different feedback channels		
	37	% of feedback received by category in total		
		Satisfaction		
	38	% of affected people consulted who state that CFM feedback channels are relevant to their needs		
	39	% of affected people consulted who state that they are satisfied with their experience when accessing the CFM		
	40	% of affected people consulted who state that they are satisfied with the response they received to address their feedback		
		Responsiveness		
	41	Average response time per feedback category		
	42	% of feedback items still outstanding (to be resolved)		
	43	Number of feedback successfully referred in accordance with the inter-agency SOPs		
Information & Communication		Information & Communication		
	44	Number of collective inter-agency messages developed in appropriate languages for distribution to affected communities		
	45	Response-wide surveys and assessments include questions on information needs and preferred communication channels of affected people (Yes/No)		
	46	% of affected people consulted who state that they feel informed about the humanitarian assistance available to them		
	47	% of affected people consulted who state that they the communication channels used to inform them are accessible		

	48	% of people with disabilities consulted who report feeling informed about the humanitarian assistance available to them
	49	% of women and girls consulted who report feeling informed about the humanitarian assistance available to them
	50	% of affected people consulted who state that they are aware of the expected behaviour of humanitarian staff, especially the commitments to prevent SEAH
Inclusion & Participation		**Inclusion & Participation**
	51	Disability-specific questions are included in response-wide surveys and assessments (Yes/No)
	52	Number of elderly people reached through direct consultations on the humanitarian assistance
	53	Questions are disaggregated by gender, age, and disability included in response-wide surveys and assessments (Yes/No)
	54	% of total project implementation organisations that are national and local partners
CERF standard AAP indicators		**Regular response** **Agencies are <u>encouraged</u> to use one or more of these indicators in the Results Framework of their regular CERF projects** (i.e., not focused on collective AAP interventions). When using these, **please ensure that the indicator code is captured exactly as presented** (e.g., "AP.1b", not "AP1B"); otherwise, CERF GMS will not be able to capture them.
	AP.1b	AP.1b % of affected people consulted who state that they are aware of their rights and entitlements
	AP.3b	AP.3b % of affected people consulted who state that they were consulted on the humanitarian response
	AP.4b	AP.4b % of affected people consulted who state that the assistance, services and/or protection provided correspond with their needs
	AP.5b	AP.5b % of affected people consulted who state that they were able to access humanitarian assistance and services in a safe, accessible, accountable, and participatory manner
	AP.6b	AP.6b % of issues identified in feedback processes for which solutions are in process or closed
	AP.7b	AP.7b Number of community-based complaints\feedback mechanisms established