EMPOWERING FRONTLINE STAFF TO ENABLE THE PARTICIPATION OF CRISIS-AFFECTED PEOPLE

LEARNING REPORT

April 2023
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This report has been produced as part of the International Rescue Committee (IRC) Empower to Inform project, supported by USAID’s Bureau of Humanitarian Affairs (BHA).

The report was researched and written by Sharon Reader & Sarah Cechvala, Independent Accountability to Affected People Consultants.

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LIST OF ACRONYMS

AAP Accountability to Affected Populations
ALNAP Active Learning Network for Accountability and Performance in Humanitarian Action
CDAC Communicating with Disaster Affected Communities
CHS Core Humanitarian Standard
DRC Democratic Republic of Congo
E2E Empower to Enable
FFA Force Field Analysis
FGD Focus Group Discussion
HAR Humanitarian Accountability Report
HQ Headquarters
IASC InterAgency Standing Committee
IFRC International Federation of Red Cross and Red Crescent Societies
INGO International Non-Governmental Organization
IRC The International Rescue Committee
KII Key Informant Interview
LNGO Local Non-Governmental Organization
ODI Overseas Development Institute
PAC Project Advisory Committee
SOHS State of the Humanitarian System
UN United Nations
UNHCR United Nations High Commissioner for Refugees
USAID BHA USAID Bureau of Humanitarian Affairs
WFP World Food Programme
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Executive Summary

About this report

Frontline staff indisputably play a critical role in enabling the participation of crisis-affected people in the design and delivery of humanitarian assistance (IRC, 2021; IFRC, 2021; UNICEF, 2020). They are frequently described as the ‘bridge’ between the organization and the communities they serve, helping to build understanding, trust, and safe access (IFRC & CDA, 2020; IRC, 2019; Degett, 2019). However, the extent to which frontline staff can fulfill this role depends on many factors, including their own skills, the time and resources they have access to, and the organizational processes, structures, and culture which support them – as well as external challenges of the context in which they work. This Learning Report offers insight into some of the factors that empower frontline staff to enable the participation of crisis-affected communities, as well as the barriers that limit their potential. Based on these findings, it offers three changes humanitarian organizations can make to better support their frontline staff to enable the participation of crisis-affected people.

Data for this report was gathered through a literature review, key informant interviews, focus group discussions, and remote in-country workshops with IRC staff and their local partners. In total, researchers reviewed 34 documents and spoke with 72 aid practitioners across different levels and organizations.

MORE ABOUT THIS REPORT

This report has been produced as part of the International Rescue Committee’s (IRC) Empower to Inform project, supported by USAID’s Bureau of Humanitarian Affairs (BHA). This report is the first phase of the Empower to Enable (E2E) pillar which aims to foster accountable and client centric humanitarian assistance and support progress towards localization and operationalization of accountability to affected populations (AAP) standards. Findings from this research will inform the next phase of E2E, which aims to equip humanitarian organizations with tools and a roadmap to facilitate the institutional change needed to empower frontline staff to enable greater participation of crisis-affected people.

For more see: https://www.usaid.gov/about-us/organization/bureau-humanitarian-assistance

1 For the IRC a ‘client’ is a person for whom the IRC has provided, or intends to provide, assistance or services. The IRC uses the term “client”, to signal their belief that the people they serve have the right to decide what kind of aid and services they need and want.
What enables frontline staff to support participation?

This research identified the following factors that help to empower frontline staff to enable participation of crisis-affected people:

- **Frontline staff have the skills to enable participation:** They have the knowledge and practical skills (such as soft skills of listening, empathy, facilitation and cultural sensitivity) to implement participatory approaches and build trust with crisis-affected populations.

- **Frontline staff have clear guidance as to what is expected of them:** They are provided with clear expectations in the form of guidance, frameworks, policies, role descriptions, and individual performance objectives which helps them to make time for and to see participation as central to their role, rather than an optional add-on.

- **Frontline staff work closely with local partners:** They are recruited from or work closely with local partners in order to improve access to, acceptance from, and understanding of the local context and community.

What prevents frontline staff from enabling participation?

The research also exposed barriers that hinder frontline staff from enabling the participation of crisis-affected people in the design and delivery of humanitarian assistance. These fall under three categories within the humanitarian system; however, this report focuses on how these barriers manifest at the “field level” and the challenges they create for frontline staff.

**HUMANITARIAN & ORGANIZATIONAL CULTURE**

- **Participation is not widely understood** – Across and within organizations there is no shared understanding of what participation is, what it entails, and why we do it; meaning it is often understood as community feedback mechanisms, assessments, or communication.

- **Limited leadership support and prioritization** – When senior leadership do not see strengthening participation as a priority, then neither do their staff – and even if they do, it makes it very difficult for them to drive it forward.

**ORGANIZATIONAL STRUCTURES & PROCESSES**

- **Participation is not adequately resourced** – When resources, such as funding and materials, are not allocated to frontline staff for participatory activities it can damage their reputation and acceptance in the community and lead to implementation delays and lower quality programs.

- **Frontline staff are not included in decision-making** – Frontline staff tend to be excluded from decision-making processes; and their marginalization makes it much less likely for crisis-affected people to be able to participate.

**FIELD-LEVEL PRACTICES**

- **Frontline staff have too many competing priorities and limited time** – Frontline staff are often overwhelmed with many tasks and priorities, and so participation is often neglected.

- **Frontline staff have limited ability to respond to the needs of crisis-affected people** – Rigid programs and operations and limited decision-making power means frontline staff are unable to respond to and act on the outcomes of community feedback and participatory exercises.
How can organizations better empower their frontline staff to enable participation?

Three key changes emerged that humanitarian organizations could make to better support their frontline staff to enable the participation of crisis-affected people. These include:

1. **Systematically engage frontline staff in decision-making**
   - Involve frontline staff in program design
   - Engage frontline staff in program management
   - Strengthen internal accountability to frontline staff

2. **Strengthen the understanding of participation and how to put it into practice**
   - Simplify participation and accountability
   - Integrate participation into program design and management tools and processes
   - Provide training and mentoring on participation to all staff
   - Ensure frontline staff have the basic resources they need to enable participation

3. **Integrate participation within organizational culture and strategy**
   - Improve leadership understanding of and resource allocation to participatory activities
   - Integrate participation into organizational strategy, policy, and values
SECTION 1:
INTRODUCTION

Seven years on from the Grand Bargain Commitments\(^5\) and the launch of the Participation Revolution,\(^6\) humanitarians must face the disappointing reality that there has been little meaningful change in the way that aid is designed and delivered. In 2022, only 34% of crisis-affected people felt humanitarian aid met their priority needs; while only 1 in 3 said they were able to provide feedback to aid organizations (CHS, 2022). Rather than a fundamental change in the relationship with crisis-affected people, the Participation Revolution has led to a focus on policies, tools, and processes – such as feedback mechanisms. While important, this focus will not deliver the change the sector says it so desperately wants and needs. A true participatory revolution will require deep structural change to the humanitarian system – from donors to organizations, across all their ways of working.

Slow progress towards meaningful change in the way the humanitarian sector works is arguably most acutely felt by the staff, volunteers, and local agencies on the frontlines of response. Frontline humanitarian workers are the eyes, ears, and hearts of emergency operations and programs. Daily, they engage, support, and even put their lives at risk, to serve people in crisis. Yet, the voices and knowledge of frontline staff are largely overlooked in operational and organizational decision-making (Doherty, 2022). Frontline staff themselves recognize the importance of participation, but the sector lacks learning and practical guidance about how to embed meaningful participation into its ways of working – from daily routines and staffing models to organizational culture and values.

In response to this gap between commitment and action, the International Rescue Committee (IRC),\(^7\) with the support of USAID’s Bureau of Humanitarian Affairs (BHA),\(^8\) launched the Empower to Inform project with a specific Empower to Enable (E2E) pillar that aims to foster accountable and client centric\(^9\) humanitarian assistance by empowering frontline staff to enable the participation of crisis-affected people in the design and delivery of humanitarian assistance. The project aims to support progress towards the localization of humanitarian assistance\(^10\) and operationalization of accountability to affected populations (AAP) standards.

This Learning Report is part of the first phase of this project. It is based on a sector-wide literature review, interviews with accountability to affected populations’ (AAP) experts, and workshops with frontline staff in two IRC country programs, Iraq and the Democratic Republic of the Congo (DRC). This Learning Report highlights the critical role of frontline staff in enabling the participation of crisis-affected people. It outlines the key building blocks that can support frontline staff to strengthen participation, as well as the barriers that are holding them back. It provides practical next steps for the E2E project, which will design and develop tools and a roadmap to help organizations empower front-line staff to enable the participation of crisis affected people in the design and delivery of humanitarian assistance.

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\(^7\) [https://www.rescue.org/](https://www.rescue.org/)

\(^8\) For more see: [http://bit.ly/3zWbCvo](http://bit.ly/3zWbCvo)

\(^9\) For the IRC a ‘client’ is a person for whom the IRC has provided, or intends to provide, assistance or services. The IRC uses the term “client”, to signal their belief that the people they serve have the right to decide what kind of aid and services they need and want.

\(^10\) For more see: [https://gblocalisation.ifrc.org](https://gblocalisation.ifrc.org)
TERMINOLOGY

The humanitarian sector lacks a consistent agreement on certain key terms. Therefore, this report will use the following definitions:

- **Accountability to Affected People (AAP)** – An active commitment to use power responsibly by taking account of, giving account to, and being held to account by the people humanitarian organizations seek to assist.[11]

- **Client** – A term used by the IRC to define a person for whom the IRC provides, or intends to provide, assistance or services. The term “client” signals the IRC’s belief that the people being served have the right to decide what kind of aid and services they need and want.[12]

- **Client Responsiveness** – Measures taken to collect, analyze, and respond to crisis-affected people’s feedback and complaints and to support their participation and engagement in project activities and decision-making processes.[12] The term encompasses similar concepts and approaches used by organizations such as AAP or Community Engagement and Accountability (CEA).

- **Community Engagement** – The process of integrating meaningful community participation, open and honest communication, and mechanisms to listen to and act on feedback within programs and operations, which helps organizations to be accountable to the people they serve.[13]

- **Frontline Staff** – The humanitarian staff and volunteers who interact directly with clients in the delivery of humanitarian assistance from international and national organizations.[14]

- **Participation** – Putting the needs and interests of crisis-affected people at the core of humanitarian decision making, by actively engaging them throughout decision-making processes.[15]

The terms participation, community engagement, and accountability to affected populations are all used in this Report, often to describe the same process. However, the authors note there are very important distinctions between these categories. Yet, as this report is focused on the participation of crisis-affected people, but the literature and interviewees more commonly referred to this as accountability to affected populations or community engagement, some flexibility in the use of these terms has been afforded.

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11 IASC definition: https://bit.ly/3Kw58by
12 See: https://bit.ly/403xTC3
13 IFRC definition: https://bit.ly/3myDD9m
14 IRC definition.
15 InterAgency Standing Committee (IASC) Definition as agreed on March 8, 2017. For more see: https://bit.ly/3mvSBgg
Data for this study was gathered through a number of methods including a literature review, key informant interviews (KII), focus group discussions (FGD), and remote in-country workshops. In total, researchers reviewed 34 documents and spoke with 72 aid practitioners across different levels and organizations.

**Literature Review**

Researchers reviewed 34 reports, evaluations, and guidance documents. Figure 1 provides a breakdown of the type of documents reviewed (Annex B provides a full list of works cited). Reports were sourced from key accountability learning hubs, including the InterAgency Standing Committee (IASC) Accountability and Inclusion Resource portal,\(^{16}\) ALNAP’s Help Library,\(^{17}\) the British Red Cross Community Engagement Hub,\(^{18}\) the Communicating with Disaster Affected Communities (CDAC) website,\(^{19}\) as well as reports shared by key informants interviewed for the research.

Literature was reviewed to understand the current role of frontline staff in enabling participation, the drivers that empower or hinder them in this process, and examples of good practice. Common themes were identified using qualitative coding. Notably, most literature focused more on the organizational enablers or barriers to AAP, rather than the specific role of frontline staff in participation. Findings from the literature were used to inform and confirm the KIIs and FGDs.

**Key Informant Interviews and Focus Group Discussions**

Twelve KII and two FGDs were conducted between December 2022 – February 2023, convening 20 people. Participants represented a wide range of organizations, including humanitarian agencies (including the IRC), umbrella entities (such as CDAC and IASC), UN agencies (such as UNHCR and WFP), the International Federation of Red Cross and Red Crescent Societies (IFRC) and local organizations. Discussions included frontline staff, senior

\(^{16}\) See: [https://aap-inclusion-psea.alnap.org](https://aap-inclusion-psea.alnap.org)

\(^{17}\) See: [https://www.alnap.org/help-library](https://www.alnap.org/help-library)

\(^{18}\) See: [https://www.communityengagementhub.org](https://www.communityengagementhub.org)

\(^{19}\) See: [https://www.cdacnetwork.org](https://www.cdacnetwork.org)
management, technical advisors, and program managers. Figure 2 offers a breakdown of the role and type of institution of the KIIs and FGDs. Researchers used a Listening Methodology\textsuperscript{20} for the KIIs and FGDs, which is an open, iterative approach of questions, where interviewees determine the direction of the conversation based on experience and interest. Thus, while lines of inquiry were developed based on the literature review (see Annex B), and these only guided conversations.

**Force Field Analysis Workshops**

The research team conducted three remote force field analysis (FFA) workshops, bringing together 52 participants. These workshops supported frontline staff and local partners’ participation in the research. FFA is an approach from the peacebuilding field\textsuperscript{21} that aims to understand the factors (tangible and intangible features) of a context that are working for and against peace. Researchers adapted this approach to ask participants: *what are the factors supporting and blocking frontline staff from enabling the participation of crisis-affected people.*

Workshops were conducted with the IRC’s Client Responsiveness Team and IRC country program staff in DRC and Iraq. Local non-governmental organizations (LNGOs) working with IRC also joined country-level workshops. Workshops were conducted remotely, with some participants in the same room, or virtual breakout rooms facilitated by the researchers and the IRC Client Responsiveness team (Figure III presents the workshop participants). Workshops were conducted in French for DRC, and in English with Arabic translation for Iraq.

**Analysis**

Researchers collectively analyzed primary and secondary data to identify the key drivers that support or block frontline staff from enabling the participation of crisis-affected people in the design and delivery of humanitarian assistance. Salient themes emerged and were triangulated and verified with the IRC Client Responsiveness Team, the project advisory committee (PAC), and a group of external AAP experts who attended a face-to-face meeting in Geneva. Feedback from these sessions validated the findings in this Report and will inform the next steps of the E2E project outlined in Section VII.

\begin{table}[h]
\centering
\begin{tabular}{|l|c|}
\hline
Location & \# of Participants \\
\hline
IRC Headquarters (HQ) & 8 \\
IRC DRC & 16 \\
DRC LNGO Staff & 4 \\
IRC Iraq & 14 \\
Iraq LNGO Staff & 10 \\
\hline
\end{tabular}
\caption{Breakdown of FFA Participants}
\end{table}

\textsuperscript{20} See CDA Collaborative Learning \url{http://bit.ly/3MFdvE7}
\textsuperscript{21} For more see: \url{http://bit.ly/3GFe8K8}
Limitations of this Research

Even with the robust evidence gathered for this study, there are gaps in the research – which largely relate to who was consulted and how that evidence was gathered – that will influence the findings. Firstly, the majority of frontline staff consulted for this report work for the IRC or for their partners, so the findings from this study inherently reflect their experiences. While many of these experiences are also discussed in the literature, the lack of specific data in external reports on the role of frontline staff in enabling participation means further research will be needed to validate these findings with other organizations, and in particular, with their frontline staff.

Secondly, while this report recognizes frontline staff are not homogenous, not enough data was collected to be able to differentiate between the enablers and barriers affecting different levels of frontline staff (e.g. differences between community mobilisers versus program officers).

Thirdly, the project experienced limitations in the way primary evidence was gathered. FFAs are a highly interactive methodology for sharing ideas and generating learning, which were conducted remotely over Teams and Zoom. Virtual engagements may have diminished the clarity of the data and limited the number of people willing or able to engage in the process. Additionally, translation may have limited both participant’s and researcher’s ability to share and analyze information during and after the FFAs.

12 Approximately 65% of those interviewed were IRC staff and 80% of all data came from IRC staff and their local partners.
SECTION 3:  
FRONTLINE STAFF & PARTICIPATION – HOW IMPORTANT ARE THEY?

It is widely accepted that frontline staff play a critical role in enabling the participation of crisis-affected people in the design and delivery of humanitarian assistance (IRC, 2021; IFRC, 2021; UNICEF, 2020). They are frequently described as the ‘bridge’ between the organization and the communities they serve, helping to build understanding, trust, and safe access (IFRC & CDA, 2020; IRC, 2019; Degett, 2019).

As the group of staff with the most direct day-to-day contact with crisis-affected people, frontline staff are engaged in a wide range of activities aimed at ensuring an organization’s programs are accountable and responsive (see text box below). Frontline staff interviewed for this report commonly discussed how they provide information and take responsibility for handling feedback and complaints from crisis-affected people. ALNAP identified frontline staff as critical to ensuring information about peoples’ needs and priorities is shared internally, so it can be used to inform program design and delivery (Doherty, 2022). Examples of this, include Red Cross volunteers collecting feedback during the Ebola response in DRC to guide health interventions and World Vision frontline staff in Ethiopia who helped the organization better understand persistent challenges in the community (Natoli, 2020; Cechvala, S. and Jean, I, 2016).

More broadly, frontline staff are critical for building relationships and trust with crisis-affected people, without which, people may not share information, engage in projects, or welcome staff safely into their community (IFRC, 2021; Natoli, 2020). The 2022 State of the Humanitarian System (SOHS) highlights the importance of interactions between frontline staff and crisis-affected people, with those given the chance to voice their opinions, 80% more likely to feel positive about the relevance of the aid they received (ALNAP, 2022).

Although feedback mechanisms were commonly mentioned, frontline staff interviewed for this report were less likely to discuss how they enabled participation in project design. This is reflected in the 2018 SOHS Report which found less than half (42%) of humanitarian staff said the participation of affected people in their programs was good or excellent (ALNAP, 2018). Furthermore, gaps in acting on and responding to community feedback can erode people’s trust in humanitarian organizations (CHS, 2020; Ground Truth Solutions, 2019; Lough O. S., 2021).

The extent to which frontline staff are able to act as the ‘bridge’ and enable the participation of crisis-affected people depends on many factors. This includes their own abilities and skills, the time and resources they have access to, and the organizational processes, structures, and culture which support them – as well as external challenges of the context in which they work. The following sections of this report will investigate these enablers and barriers for participation in more detail.

What is the role of frontline staff in enabling participation?

- Providing information about the organization and its programs and activities to crisis-affected populations.
- Collecting and responding to feedback and complaints and answering questions from affected people.
- Managing expectations for crisis-affected people, and host communities, about the goals and outcomes of the project as well as the organization’s capacities.
- Enabling the participation of crisis-affected people in program design i.e., through meetings, FGDs, or participatory workshops.
- Engaging communities in making decisions about the program during implementation i.e., through working with committees, town hall meetings, or regular FGDs.
- Implementing safeguarding policies i.e., prevention of sexual exploitation and abuse.

(IRC, 2019; IFRC, 2021; Kahn, 2020)
SECTION 4: THE ENABLERS THAT SUPPORT PARTICIPATION

Several enablers emerged from this research, that when in place, can support frontline staff to strengthen the participation of crisis-affected people in the design and delivery of humanitarian assistance. This section outlines these three key enablers, how they manifest at the “field-level”, and the impact they have on frontline staffs’ ability to enable stronger participation.

These include:
• Frontline staff have the skills to enable participation;
• Frontline staff have clear guidance as to what is expected of them; and
• Frontline staff work closely with local partners.

Frontline staff have the skills to enable participation

At the most basic level, frontline staff need the knowledge and practical skills to implement participatory approaches in their daily work. Evidence from this research stressed how regular training in local languages, coupled with ongoing technical support and mentoring, has helped frontline staff gain the necessary skills to enable participation (IFRC, 2021; IRC, 2019; CHS, 2020; IRC, CDA and UCL, 2018). In a UN survey, frontline staff in Somalia reported a lack of practical knowledge as one of the main challenges they face in trying to strengthen community engagement, while 67% of respondents asked for more training on accountability approaches (Bhandari, 2022). This was echoed in a NORCAP review, where staff identified community engagement training (56%) and technical support (39%) as the main support needs for them to be able to strengthen AAP in their work (NORCAP, 2021).

However, it is not only practical knowledge that matters, but also “softer skills” – such as listening, empathy, facilitation, and cultural sensitivity – which are critical to building trust and relations with communities (Mosel, 2019; IFRC & CDA, 2020). Research by the Danish Refugee Council identified these “soft skills” as critical for the successful implementation of activities essential for participation, such as community dialogue, meetings, and FGDs (Degett, 2019). Integrating these requirements into recruitment and performance appraisals, as well as providing training and coaching, can help to strengthen the ability of frontline staff to listen, engage, and encourage participation (IRC, 2019). As one key informant explained, “Investing in system change is not about producing documents. It is investing in people.”

“Staff attitudes matter, we need to be humble and open to learning from the community if we want them to participate.”

Key Informant
Frontline staff have clear guidance as to what is expected of them

Clear expectations in guidance, frameworks, policies, role descriptions, and individual performance objectives can allow frontline staff to make time for and to see participation as central to their role, rather than an optional add-on. IRC staff explained how the integration of participation in country Standard Operating Procedures (SOPs) and the organization’s program quality standards helped to make it both, “a clear requirement to engage with communities” and “provide clear guidance on what frontline staff need to do.” This is echoed in the 2022 Humanitarian Accountability Report (HAR), which stressed the importance of having clear policies on accountability that are known and understood by all staff and integrated into program design and delivery, as well as ensuring staff sign and understand Code of Conduct policies (CHS, 2020; IRC, 2019). Several key informants also noted safeguarding policies, coupled with training for frontline staff about their content and purpose, is important for building and maintaining trust with crisis-affected populations.

Simple tools that support the practical implementation of participatory approaches are also critical for frontline staff (ALNAP, 2022). In research carried out for the IFRC, frontline staff expressed how the organization’s community engagement guide, toolkit, and trainings, supported them to practically implement stronger participation in their daily work (IFRC & CDA, 2020).
Frontline staff work closely with local partners

Working with local partners can help frontline staff to enable participation by improving access to, acceptance from, and understanding of the local context and crisis-affected people. Access to communities is often discussed as a key challenge for frontline staff given the environments in which they work: for example, volatile security situations or requirements to secure government permission for field visits. The 2022 SOHS reported that a lack of proximity to communities is a recurrent problem for many organizations; one aid worker in Ethiopia explained, “You need to talk to the people to understand what’s needed to make sure whatever aid you take is meaningfully used — but then you can’t talk to the people. So, you take what you think is needed. No-one’s to blame, but humanitarian response without continuous discussion and participation of the affected community will have limitations” (ALNAP, 2022).

Many engaged in this research noted that working with local partners or recruiting frontline staff and volunteers from the affected population can dramatically ease issues of accessibility and enhance trust and communication between INGOs and affected populations. IRC staff in Iraq and Tanzania explained how local partners are often based in the community and so they have more regular and easier access to crisis-affected people, without the need to secure government approval for field visits. IRC staff in Kenya and the DRC discussed how working with local civil society and refugee-led organizations helps them to better understand how to engage specific communities.

**Importance of Meaningful Partnerships**

The benefits of working with, and inevitably devolving power to, local partners has also been recognized by the wider humanitarian sector (CHS, 2020). This is in part due to the Localization Agenda established by the Grand Bargain, but also driven by the increasing number of emergencies where international actors struggle to ensure the necessary access to crisis-affected people — e.g., COVID-19, Syria response, etc. (Robillard, S. et al., 2021). The potential for localization to help drive a ‘Participation Revolution’ has also not been missed by individual aid practitioners; when asked by NORCAP how the sector could best strengthen accountability to affected people, the most common suggestion was to scale up localization efforts. However, it cannot be taken for granted that working with local staff or partners will automatically lead to improved participation. The ODI’s research into dignity found that there was no connection between peoples’ feelings of being treated with dignity and respect and whether aid was provided by a local or international organization (Mosel, 2019). This highlights the importance of ensuring that local partners are also supported to enable participation and that relationships with local organizations are equal partnerships which facilitate a genuine transfer of power, rather than the traditional donor/implementing partner model. A recent report about risk management for the humanitarian sector argues that local partners play an essential role in the risk management practices of INGOs. Yet far too often, these partnerships are undervalued, and transactional in nature which does not build meaningful relationships; but rather, increases the risk exposure for both organizations — INGO and LNGO (Hamsik et al., 2022).

> Understanding the context is really important, but to understand it and support it, we need trust between staff and the community. This is essential to give the community more control and ownership of what we do in the next phase of the project.”

Iraq Frontline Staff

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23 For more see: [https://gblocalisation.ifrc.org](https://gblocalisation.ifrc.org)

24 NORCAP review based on interviews with 34 aid practitioners at HQ, region and country level.
This section presents the key barriers blocking frontline staff from enabling the participation of crisis-affected people in the design and delivery of humanitarian assistance. These barriers are highly connected and can create negative reinforcing cycles. For example, when participation is not widely understood within an organization, it is unlikely to be included in planning processes, which means frontline staff will not be allocated the necessary time and resources to undertake such work, all of which can contribute to the lack of understanding of participation and what it requires. While many of these barriers have been discussed in previous reports, what is less explored is the specific impact they have on frontline staff and their ability to enable participation. Thus, this section focuses on how these barriers manifest at the “field level” and the challenges they create for frontline staff.

While this section focuses on the barriers as they manifest for frontline staff, many of these barriers emerge from broader issues within organizations or the wider humanitarian sector. Recognizing where these barriers might begin is important, particularly when thinking about how to foster changes across organizations as well as the humanitarian system. The figure below offers a visual representation of how culture and practices are shaped and actualized at each level of the system – with the top-down dictating much more than the bottom-up. We use these headers to break down the individual barriers in the section below and begin with the broader system issues and work down to field-level practices.
Humanitarian & Organizational Culture

PARTICIPATION IS NOT WIDELY UNDERSTOOD

It became clear in this research that there is no shared understanding of what participation is, what it entails, and why we do it. ‘Participation’ was interpreted by different participants as communication with communities, feedback mechanisms, or program assessments and monitoring surveys. Research by the Danish Refugee Council echoed these findings, “Most stakeholders consulted, including affected people themselves, did not seem aware that beneficiaries are supposed to take part in decision-making concerning the design and implementation of activities, and were therefore rarely consulted (if at all) before the end of the programme cycle, when most decisions had already been taken” (Degett, 2019).

The confusion over the meaning of participation and what it entails stems from a lack of agreement about the purpose and objective of participatory approaches. The 2020 HAR explained that organizations are still not clear about what they are trying to achieve through participation and many still see it as an add-on to existing activities rather than a fundamental rethinking of their role and relationship with communities (CHS, 2020). This is also noted in research by ODI in Bangladesh, which found that frontline staff saw participation as a means to an end rather than a right of affected people (Lough O. S., 2021). Fundamentally, if the sector cannot agree on what constitutes participation, why it is needed, and what it requires – including a hand over of power – it is unlikely that frontline staff will be able to deliver meaningful participation in their day-to-day work. Instead, participation will continue to be limited to a very narrow scope of consultation and feedback.

“What are we accepting as participation? A lot of people think that feedback mechanisms are participation, but that has nothing to do with handing over control of the space, it is, in fact, just good programming.”

Key Informant

Can humanitarians really devolve power?

The 2018 SOHS Report argues that “Participatory programming – and accountability to affected populations in general – is fundamentally about power… Real participation is about a transfer of power” (ALNAP, 2018). However, such a significant change in the power balance, is often viewed with great trepidation, as organizations and their staff may fear the personal impact of such change on their individual lives and livelihoods. Given this, agencies and their staff may be disincentivized to alter the structures that maintain their positions. One key informant said, “There is still a fear that if we [frontline staff] go up that participation ladder to empowerment we will not have jobs, or we will in some way be declaring that our organization is redundant and therefore not needed.”

As a sector, we have committed to achieving a “Participatory Revolution” and the devolution of power to people to make decisions that affect their lives. Yet, research shows participation for many organizations has much more to do with improving our projects, rather than a real handing over of power (Lough O. a., 2021). Changing who holds the power within the system was an issue discussed by many people engaged in this research. One key informant said, “There is a culture within the sector that feels that we decide for people, but this ignores peoples’ wants, wishes. We develop standards and trainings, but everything turns into an internal system for ourselves and that leaves out local actors and is unfit for local context.” Handing over power to people requires a fundamental shift in how organizations operate and how programs are designed and delivered. As one informant said, “It is the attitude about and understanding of what participation is throughout the humanitarian system. We don’t really want to hand over the power and responsibility… We don’t want it fully actualized [participation] because it is harder to deliver.”
LIMITED LEADERSHIP SUPPORT AND PRIORITIZATION

An organization’s leadership is responsible for setting organizational culture and informs what is valued, prioritized, monitored, and resourced (CHS, 2020; IFRC & CDA, 2020; Jean, 2017). Importantly, the ways in which leaders do or do not prioritize the participation of crisis-affected populations can have a dramatic effect on what takes place at the field-level and the possibilities for frontline staff to enable greater participation (IRC, CDA and UCL, 2018; 2020; Kahn, 2020; IRC, 2021). Unfortunately, interviews for this research suggest that leadership do not always see participation as a priority. As one key informant noted, “It [participation] is seen as a fluffy business and time consuming and other priorities get put first.”

Fundamentally, when senior leadership do not see strengthening participation as a priority, then neither do their staff – and even if they do, it makes it very difficult for them to drive it forward (Cechvala, 2017; IFRC & CDA, 2020; CHS 2022). This has a ripple effect across the organization, with country leadership also not seeing participation as important because signaling from headquarters does not incentivize them to do so, and this translates to the work of frontline staff. Several key informants explained how a lack of support from managers limits their opportunities to engage crisis-affected populations. For example, research in Bangladesh, found a lack of leadership prioritization of accountability was a key barrier to the utilization of feedback by aid practitioners in the Rohingya refugee response (Lough O. S., 2021).

Even when leadership verbalize support for the participation of crisis-affected people, this is often not backed up with action. Several reports stressed the importance of leadership demonstrating an active commitment to accountability that goes beyond policy documents by ‘leading by example’ (IFRC & CDA, 2020; Cechvala S. a., 2019). IASC’s guidance for humanitarian coordinators and country teams suggests that leaders should dedicate time to speak directly to frontline staff and affected people (IASC, 2017). Workshop participants for this research suggested that when actions don’t match commitments, “client engagement becomes a box ticking exercise that does not inform program or operational decisions.”

Building Participation into Organizational Culture

A common challenge identified in this research, is that participation and accountability approaches are not systematically integrated in organizational structures, policies, and processes. Even when accountability is referenced in organizational strategies and policies, it is often a high-level commitment that does not translate into concrete requirements in program planning and management processes (CHS, 2020; NORCAP, 2021; Metcalfe-Hough W. F.-K., 2020). When participation requirements are not clearly articulated in program planning and management, or included in staff roles and responsibilities, it can lead frontline staff to de-prioritize participation, see it as optional or an add-on, or someone else’s responsibility. One key informant explained how country-level project staff are not always willing to take on the ‘extra responsibilities’ associated with participation, for example information provision or feedback collection. Another informant explained that “When staff have AAP responsibilities as an ‘add on’ and it is not part of their main role, they become overwhelmed with too many responsibilities.”
Organizational Structures & Processes

**PARTICIPATION IS NOT ADEQUATELY RESOURCED**

When participation is not built into structures, policies, and processes, it means frontline staff don’t have the funding and resources necessary to enable effective participation. For example, staffing, participatory activities, and materials are not included in program plans and budgets, which severely limits frontline staffs’ ability to put participation into practice. Further, even when funding is available for participatory approaches it is often tied to a single intervention or project, which creates challenges for sustainability. The lack of resources was usually the first barrier shared by frontline staff consulted for this study. Frontline staff engaged in this project explained: “We have no budget line for field missions which limits contact with communities”; and “We don’t have enough phones and tablets to collect and log feedback from clients”; and “We don’t have budget to hire interpreters, which makes it difficult to communicate with certain communities.”

Many frontline staff explained the lack of resources damages their reputation and acceptance in the community and can lead to implementation delays and lower quality programs. As one key informant said, “If you want to do more community engagement, you need more time before any call for proposal, and you also need to have a specific amount of money budgeted. You need resources to do it properly and continuously.” This was echoed in a UN survey of frontline staff in Somalia, where a quarter of respondents reported challenges to participation when community engagement is not properly resourced in proposals and budgets; and 49% said dedicated budget lines were needed for community engagement activities (Bhandari, 2022).

**FRONTLINE STAFF ARE NOT INCLUDED IN DECISION-MAKING**

The exclusion of crisis-affected people from decisions about the design and delivery of humanitarian assistance has been extensively explored and reported as a key barrier to stronger accountability in the literature (ALNAP, 2022; CHS, 2022; Metcalfe-Hough W. F.-K., 2020). However, what is understudied is that frontline staff also tend to be excluded from decision-making processes; and their marginalization makes it much less likely for crisis-affected people to be able to participate. Given that frontline staff are often the bridge between organizations and communities, their voice and perspectives can be key to ensuring programs and operations are achievable and responsive to the interests and needs of the population. A recent ALNAP report explains, “These individuals [frontline staff] make decisions and solve problems every day in their work with crisis-affected populations. The interactions they have with communities produce important information on how to implement projects most effectively to meet local needs. Decisions stemming from this experiential knowledge can be as valuable as decisions reached through more formal, explicit evidence” (Doherty, 2022).

Evidence from this research highlights that many organizations use top-down decision-making processes for both designing programmes and managing them. As one workshop participant noted, “Technical expertise has more ‘value’ than frontline staffs’ knowledge and experience of the context. Following technical advisors and standards is more important than modifying to suit the local context, and frontline staff don’t feel able to challenge this. Frontline staff contributions are not valued in the same way.”

“The reality is that the funding is little and people [frontline staff] get worried about setting up systems that cannot be sustained. Frontline workers understand that they need these systems, but they don’t want to set up something that will fail because they do not have adequate support.”

Key Informant

“The design process does not involve frontline staff. There is a disconnect between frontline staff and decision-makers, and this creates a barrier between frontline staff and communities, because the less frontline staff are involved at the beginning, the less they commit themselves to being responsive to the clients.”

Key Informant
This is echoed in research by ALNAP which found, “Frontline staff and their managers were conscious of how gender, seniority, and ethnic dynamics influence who feels comfortable openly sharing challenges, experiences, and potential solutions. This can affect whose knowledge gets heard and has the potential to influence change.” The report also noted, “Without time for frontline staff to share learning from communities and without adequate respect for their voices within humanitarian organisations, efforts to improve community engagement, participation, and accountability to affected populations are unlikely to materialize” (Doherty, 2022). Even when participation takes place, it often occurs in isolation, without any subsequent impact on program design or delivery. One key informant explained, “Organizational culture does not value or respond to the outcomes of frontline staff engagement with communities. Participation happens at the frontline but does not deliver change further up the chain.”

This barrier was identified as a key barrier during sessions to validate the findings of this Report with staff in DRC and the E2E PAC, with one DRC staff member noting that often frontline staff are hired weeks or months after a project starts, so are not even in place to support the design process.

**Field-level Practices**

**FRONTLINE STAFF HAVE TOO MANY COMPETING PRIORITIES AND LIMITED TIME**

Frontline staff often operate under myriad competing priorities that can shift rapidly. They may want to ensure they are working closely with crisis-affected people, but this can be deprioritized in the face of competing concerns. As one frontline staff noted, “The time allocated to implement the program only allows us to achieve the main outcomes, rather than thinking about engaging the community.” This lack of time and space for participation with crisis-affected people was also reported widely in the literature. For example, those interviewed for the 2018 SOHS said the main barrier to participation was time (ALNAP, 2018).

Frontline staff are often the first to feel the impact of budget restrictions or changing organizational priorities. One key informant explained the tendency is for things to “collapse onto frontline staff” as administration or finance support is reduced, which further limits the bandwidth of frontline staff to work with affected people. Another key informant argued, “… the problem [for frontline staff] is they are overworked. They have so much on their plates and there is a lot of push on them from headquarters, and this is a crisis.”

**FRONTLINE STAFF HAVE LIMITED ABILITY TO RESPOND TO THE NEEDS OF CRISIS-AFFECTED PEOPLE**

Frontline staff not only have limited opportunities to input to organizational decisions (as described above), but they also tend to confront barriers when trying to make programmatic or operational decisions based on the feedback or input from crisis-affected people. When frontline staff have limited opportunity to respond to or make changes based on feedback it can significantly impact program quality, frontline staff motivation, and the quality of participation they can achieve with crisis-affected people. As a report explains: “Effective and timely changes are harder to achieve when the knowledge of staff who are closest to

"We assume that frontline staff have time, energy, and space to engage communities in an effective way. And that is wrong. Their time is limited, and they spend far too much time behind computer screens responding to donors and headquarters.”

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Key Informant

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“When feedback is not responded to and clients never see any changes, they get frustrated. Clients say, ‘you come and collect all these issues, but you never do anything’. But this is also frustrating for frontline staff and demotivates them from collecting any more feedback.”

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Key Informant
communities is not maximized and respected within an organisation” (Doherty, 2022). Limited ability to make decisions can lead frontline staff to feel disempowered, which can damage the relationship and trust they have with crisis-affected people.

Frontline staff in multiple countries also described how pre-determined, inflexible, selection criteria – created by both organizations and donors – makes it difficult for them to respond to the needs of crisis-affected people, which can damage the relationship and level of trust they have with affected people. For IRC staff in the DRC this type of situation can have serious consequences, “It [pre-set selection criteria] creates a problem of acceptance, which can expose staff to issues in the community, which means the project becomes unsustainable.” A CDA-IRC report argued there is no value in collecting feedback or asking for communities to engage in programmatic efforts if the organization cannot make changes based on emerging needs and requests for alterations (IRC, CDA and UCL, 2018).

Why are frontline staff unable to use crisis-affected peoples’ input?

The inflexibility to respond to the needs of crisis-affected people felt by frontline staff, is often born from rigid donor and organizational policies, processes, and funding structures. This often means that 1) projects are based on logframes detailing specific outcomes and targets; 2) changes are usually possible but administratively burdensome; 3) donors do not easily allow for contingency or “unplanned” budget lines which respond to emergent changes to the context and needs. The 2020 Grand Bargain report found limited evidence that donors are consistently promoting or incentivizing adjustments to humanitarian programs in accordance with feedback from crisis-affected people (Metcalfe-Hough W. F.-K., 2020). Furthermore, the 2018 SOHS Report noted that both aid practitioners and affected people felt donor and agency priorities left little flexibility to respond to needs or changes in the community; while the requirement to deliver rapidly produced proposals was driven more by donor and agency timescales, than the needs on the ground (ALNAP, 2018).

The impact of these rigid processes was felt by those engaged in this research project; and as one frontline staff interviewee explained, “When designing projects, we are meant to include clients, but everyone is running to meet a deadline and there is no time to engage clients, and then we have to implement what is in the proposal and there is no flexibility to change it.” Another noted, “Typically the approach to project development is a rapid response to a request from donors, usually tied to an emergency, which leaves little room for meaningful participation and inclusion of ideas and needs by either frontline staff or the community. Projects are developed by people who are disconnected from the field and offer little insight to the actual needs on the ground.”

Notably, some donors have responded to these issues and incorporated greater flexibility to their funding mechanisms. However, this flexibility has largely not translated into organizational practices, which means staff are still unable to respond to or make changes based on community input.

SECTION 6: HOW TO EMPOWER FRONTLINE STAFF TO ENABLE PARTICIPATION

This section presents three changes that humanitarian organizations can make to better support their frontline staff to enable the participation of crisis-affected people. These changes apply to any organization working with crisis-affected people, including local, national, and international organizations. They build on the enablers — already supporting frontline staff to strengthen participation — while addressing the barriers that are limiting their potential. These changes consolidate the most common suggestions and good practices shared by humanitarian practitioners interviewed for this research. Many of them are not new, but a clear message emerges from them: more manuals and toolkits are not the answer; rather a change in culture and the way we work will be key to unlocking the potential of frontline staff to enable the participation of crisis-affected people. This section also provides recommendations on key actions donors can take to support this process.

To better empower frontline staff to enable participation, organizations should:

1. Systematically engage frontline staff in decision-making
2. Strengthen understanding of participation, and how to put it into practice
3. Integrate participation within organizational culture and processes

CHANGE 1: Systematically engage frontline staff in decision-making

By far, the most common suggestion shared was to ensure frontline staff themselves are connected and engaged in decision-making. As one key informant noted: “We need a frontline centered design approach. We are going to keep falling flat on our face until we change the way we design our programs. We will only see minor wins until this happens.” Better engagement of frontline staff in decision-making was also identified as a critical change during validation exercises for this report.

KEY ACTION 1 – Involve frontline staff in programme design

Systematically create a role for frontline staff in program design in order to help ensure new programs are based on valuable, local contextual knowledge of what is needed and possible. In practice this might include:

- Make it mandatory for frontline staff to be consulted during proposal development, ensuring their voices are systematically and thoroughly included. As one IRC DRC staff member explained, “It’s important to include frontline staff so that proposals reflect the needs and context of the clients. The frontline staff have that knowledge.”

- Make it mandatory for frontline staff to be part of the program/project design team.

- Pilot new ways of designing programs, where power is transferred to frontline staff and crisis-affected communities to lead the process and design programs based on the problems identified and prioritized by them.

- Increase the value the organization places on the local contextual knowledge and implementing experience of frontline staff and ensure this input is used and rated as highly as technical knowledge and standards.
### KEY ACTION 2 – Engage frontline staff in program management

The willingness of crisis-affected people to participate is increased when they see their opinions and feedback have been acted on quickly. Organizations can facilitate this by ensuring frontline staff are a key member of the project management team and delegating as much autonomy and decision-making power to frontline staff as possible. The START Network’s guidance on feedback mechanisms recommends, “make the feedback loop as short as possible by empowering frontline staff to make simple changes without extensive consultation” (Kahn, 2020). In practice this might include:

- **Clearly articulate the role of frontline staff in the organization’s program management tools** – e.g. make it explicit that frontline staff should attend ongoing project management and revision meetings. For example, staff from IRC country offices shared examples of being invited to join and present on community feedback during project cycle meetings which helped to strengthen the use of frontline staff perspectives in decision-making.

- **Map the key organizational decision-making moments and processes** and identify how to influence these using the outcomes of the participatory activities with crisis-affected people. This will help to ensure that participation has a clear purpose. As one key informant noted, "Being clear what specific decisions are to be informed by clients. Otherwise, we engage clients first, and afterwards we are struggling to "fit" client input into the decision-making."

- **Enable greater flexibility in programs** to be able to adapt to changes in the context and the needs of crisis-affected communities. This may involve engaging with donors to negotiate more flexible budgets so they can adapt to changes and needs that emerge post-award.

- **Decentralize decision-making to frontline staff and teams at the country level** giving them greater power and flexibility to make rapid changes based on input and feedback from crisis-affected people. For example, the decision mapping above could also specify which decisions can be devolved to frontline staff. The 2022 SOHS Report noted organizations often fail to act on community feedback because it is received by staff too junior to do anything about it, and who have no mechanisms to share it with those who have the power to act (ALNAP, 2022).

### KEY ACTION 3 – Strengthen internal accountability to frontline staff

Evidence suggests strong internal accountability between leadership and frontline staff leads to a deeper understanding of accountability throughout the organization. When frontline staff personally experience the benefits of improved participation in their working lives, they feel more informed, connected, and respected, and it becomes easier for them to reflect this approach in the way they work with crisis-affected people. Essentially, organizations need ‘to walk the talk’ internally if they want to be accountable externally. In practice this might include:

- **Hold managers accountable** for ensuring the participation of frontline staff in project design and implementation, for example by making this part of their job descriptions and appraisals.

- **Close the loop** with frontline staff by keeping them engaged and informed on how their input has been used to guide program design and adaptation.

- **Ensure that managers create a conducive, safe environment for frontline staff to speak up** in front of them by actively asking for, welcoming, and valuing their input during meetings.

- **Strengthen internal communication** processes to ensure frontline staff are well-informed about changes or decisions and can clearly communicate these to crisis-affected populations.

- **Create platforms and processes for managers to listen to frontline staff routinely and intentionally**, including asking about the context and challenges encountered, and ideas for improvements. As IRC staff explained, “…nurturing a culture of listening to the perspectives of our frontline staff. Not only for big proposals or during design, but as an ongoing process.” A case study from Pakistan, documented how one program manager would gather his frontline staff daily for 10-15 minutes to ask what they heard in the community that day that concerned them, followed by a discussion on how each issue should be handled. The meeting ended with the manager asking staff what they felt proud of from that day (Jean, 2017).
CHANGE 2: Strengthen the understanding of participation and how to put it into practice

When everyone in the organization understands what participation is, its purpose and value, how to put it into practice, and what resources it requires, frontline staff are much more likely to be afforded the time, space, support, materials, and funding they need to do this well.

KEY ACTION 1 – Simplify participation and accountability

Interviewees often discussed how organizations have made the topics of participation and accountability overly complex and technical. This led frontline staff to feel overwhelmed and uncertain about participation and resort to treating it as a box-ticking exercise. Adopting a simpler approach would help frontline staff to feel more empowered and confident to implement participatory approaches in their role. In practice this might include:

- Organizations should clearly define what participation means for them, what it looks like in practice, and the minimum actions and standards expected from frontline staff and other teams and levels, so everyone is clear of their role and responsibility in supporting this. This could be achieved through an AAP policy or strategy, but it would be critical to ensure this is disseminated and understood by all, and not just a document on a shelf.

- Adapt existing participation tools and approaches to ensure they are simple, clear, practical and available in local languages so they can be easily used by frontline staff in their daily work. These should focus on the core participation activities that frontline staff are expected to carry-out and be promoted and accessible to all frontline staff, not just those in charge of supporting accountability.

KEY ACTION 2 – Integrate participation into program design and management tools and processes

Integrating participation as a requirement into program design, management tools, and processes will help all staff to see it as a standard way of working and ensure that they don’t have to look elsewhere to understand what is expected of them. In practice this might include:

- Integrate requirements related to participation in program planning templates and processes. For example, ensure that all program plans are cross-checked to ensure they were developed in consultation with frontline staff and communities, and include concrete activities and budget that will support strong participation of crisis-affected people throughout implementation.

- All plans include indicators to measure the quality of participation with crisis-affected people and ensure that these are used as part of program monitoring, evaluation, and reporting.

- Include questions in needs assessments that will support programs to plan how best to engage communities and support their participation in decision-making.

- Integrate requirements for participation into other sectors’ tools and guidance so technical staff know what is expected of them, and to ensure that participation is a cross-cutting issue.

KEY ACTION 3 – Provide training and mentoring on participation to all staff

Everyone in the organization, from frontline staff to senior leadership and local partners, need the understanding and ability to implement participatory approaches in program design and delivery. Trainings should be accompanied with ongoing mentoring and technical support to put training theory into practice. In practice this might include:

- Ensure easily accessible training(s) on participation and accountability, covering practical and “soft skills”, is available to all staff. Frontline staff stressed the importance of delivering these trainings regularly, in multiple languages, as a way to deepen skills, educate new people joining the organization, and address gaps caused by staff turnover.

- Train all staff involved in feedback mechanisms, including frontline staff and managers, on the mechanism’s purpose, how it works, and what is expected of them, including managing informal feedback. Ensure that as part of the training, institutional structures and processes are established, and understood by everyone within in the organization, about: how and when feedback is shared, used, and responded to. Otherwise, there is a risk that feedback is collected by frontline staff but does not lead to program changes. Organizations have found that training and supporting frontline staff on data collection, analysis, and action, has improved feedback mechanisms and led to more meaningful participation (Baggio, 2019; Kahn, 2020).

- Build opportunities for mentoring among staff that carries on learning from trainings and cascades to other areas of the organization. This ensures that continuing to train and learn is not a one-time event and is a responsibility held at different levels of the organization. For example, see lessons from a Kenya Red Cross Case Study (Cechvala, S., 2017).

- Ensure the organization has dedicated accountability staff who can provide training, technical support, and mentoring to project staff, and sharing of lessons learned and best practices. Ideally these staff should be positioned at the country, regional, and HQ level.

- Identify peer learning opportunities for frontline staff so they can learn from other teams and countries. Examples include case studies, webinars, or country-to-country visits showing how both frontline staff and crisis-affected peoples’ participation has been improved.

- Include local partners in participation and AAP training and mentoring opportunities.
KEY ACTION 3 – Ensure frontline staff have the basic resources they need to enable participation

Frontline staff frequently raised barriers related to practical issues, such as budget, time, and equipment. While these may seem basic, without them, frontline staff are blocked in their attempts to reach and engage crisis-affected populations before they even start to consider participation. In practice this might include:

- **Budget adequate time and funds for participation activities.** This includes equipment such as telephones and cars that enable staff to connect with crisis-affected people as well as technical support such as interpreters to bridge language gaps. These needs should be discussed during the proposal phase and built in to program plans and budgets.

How can leaders demonstrate their priorities?

An IFRC-CDA briefing note for leaders suggests that shifting organizational cultural requires leadership to prioritize participation by the way they:

- **Model** – Who leaders listen to demonstrates whose voice is important. Leaders set expectations within institutions by the way they act, who they engage with, and how they are accountable to their staff, the communities they serve, and the donors who support them.

- **Value** – Priorities and values are set by leaders not only through their words, but also through their incentive structures, their resourcing decisions, and the data they include in decision-making processes.

- **Engage** – When leaders demonstrate their priorities and values through active engagement and responsiveness to these initiatives there is stronger institutional practice.

- **Resource** – Talk is not enough: leaders also need to invest in institutional values and structures.

(Cechvala S. 2019a)

The 2022 HAR advises leaders to exhibit the following practices in their interactions with staff:

- Recognize the contribution of others
- Use their position and power responsibly and fairly
- Listen to different perspectives
- Communicate consistently and with authenticity
- Cultivate a caring, compassionate organizational culture

(CHS, 2022)

CHANGE 3: Integrate participation within organizational culture and strategy

As the START network’s guidance on feedback mechanisms states, “Accountability isn’t an activity, it is a culture. Make sure its importance is reinforced by leadership at all levels, and that it informs everything you do. Committed leadership and established systems to draw on, mean accountability becomes a reflex” (Kahn, 2020).

KEY ACTION 1 – Improve leadership understanding, prioritization, and resource allocation

Leadership’s understanding of participation and its value is critical to ensure they prioritize it and make necessary changes to organizational processes – including integrating it in strategies and plans and allocating sufficient time, staffing, and budget. As one key informant said, “We can create the space for participation and scale it up – but will anything be done with this? Is leadership ready to be open to this and will they act on it before we ask frontline staff to do more.” In practice this might include:

- **Gather more evidence** that shows the impact of participation on program quality, including how participation provides value for money, as well as the risks of not engaging communities. However, a lot of evidence already exists and so organizations would benefit from building upon existing sector-wide and internal information that clearly demonstrates this point.

- **Create leadership incentives to strengthen participation, by making it a performance goal for all managers,** assessed during their appraisals. Provide recognition for managers who are supporting strong frontline staff and crisis-affected peoples’ participation.

- **Make it a requirement that leaders at all levels spend more time with communities,** in order to directly listen to crisis-affected people and frontline staff. This would help ensure participation informs the direction of the organization and would set an example for staff that spending time with communities is a priority and a valuable use of time.

- **Allocate a percentage of core funds** to strengthen and support participation and accountability, including for AAP technical support positions and training for staff at all levels.

- **Carry out an organizational self-assessment** to better understand how the organization’s culture either supports or hinders frontline staff and crisis-affected peoples’ participation in program design and delivery, including examining the role and perspectives of frontline staff.
• Leaders make a high-level commitment to AAP that is shared through the organization and can be further developed into a more comprehensive AAP policy.
• Develop an AAP strategy that sets out clear milestones that the organization aims to achieve in terms of strengthening participation and better supporting frontline staff to enable this.

KEY ACTION 2 – Integrate participation into organizational strategy, policy, and values

Integrating accountability commitments and requirements into organizational strategies, policy, and standards can help to shift organizational culture to better value participation and support staff to see participation as an organization-wide priority. Many organizations, including the IRC, UNHCR, IFRC, and Kenya Red Cross have reported seeing positive changes following deliberate efforts to embed participation in organizational strategy and relevant policies, such as human resource approaches (Seris, 2017; Cechvala S., 2017; IFRC & CDA, 2020; Metcalfe-Hough V. F.-K., 2021). In practice this might include:

• Review and revise the organization’s strategy, annual plan, and other key policies, such as human resources, to include concrete commitments, outcomes, and key performance indicators (KPIs) related to frontline staff and crisis-affected peoples’ participation and AAP. Audit regularly to check these commitments and KPIs are being met.
• Integrate responsibilities to ensure the participation of crisis-affected people into role descriptions, recruitment, on-boarding, and performance appraisal processes at all levels.26
• Capitalize on the Localization Agenda27 by scaling up partnerships with local organizations, who often have better access, relationships, and understanding of the context and needs.
• Organizations should review their risk management appetite and policies and assess if these are undermining AAP efforts.

The Role of Donors in Supporting Frontline Staff to Enable Participation

Donors can also play a very important role supporting organizations and frontline staff to strengthen participation with crisis-affected people. For example:

• Make it a requirement in funding proposals for organizations to explain how crisis-affected people will participate in the design and delivery of the program.
• Require more regular and precise reporting that requests evidence and examples of how the participation and feedback of crisis-affected people is being used to guide program decisions. This can prevent accountability from becoming a box-ticking exercise.
• Donors also need to make a high-level commitment to AAP and participation and ensure this is rolled out internally, so all their staff and field teams understand the importance of AAP to safe, high-quality programs, and what is expected from partners in program proposals, implementation, and reporting.
• Expand proposal timeframes to allow enough time for both frontline staff and crisis-affected populations to be consulted during the proposal development stage.
• Donors should review their risk management appetite and policies and ensure they do not block the transfer of decision-making power and funds to frontline staff and local partners.
• Donors can demonstrate that they value the knowledge and input of frontline staff by asking for this in proposals, reporting, and meetings.
• Scale up unrestricted funding, with fewer pre-set outcomes and activities, that will allow agencies to plan more projects with crisis-affected populations.
• Allow for greater flexibility and easier processes to make changes during project implementation so that programs can be adapted when the context, needs, and feedback from the crisis-affected people indicate changes are needed.
• Develop longer funding cycles to give frontline staff the time they need to build trusted relationships with crisis-affected people and allow adequate space for participation during implementation, as opposed to rushing to meet deadlines. Longer funding timeframes could also improve staff retention, addressing some of the damage caused to relationships with crisis-affected people by high staff turnover.

26 The IRC’s ‘A Guide for Client Responsive Staff Management’ outlines how this can be achieved.
27 See: https://gblocalisation.ifrc.org
As time waxes on from the commitments made during the 2016 Grand Bargain, we must ask ourselves: how long are we willing to wait until we see progress; and were our pledges to place crisis-affected people at the center of our work just a vanity project? Systems change does not come quickly or easily; however, if we want to move the needle even marginally towards our desire for greater participation of those we serve then we need to act now and with great intention.

As this research highlights, a clear and decisive first step in facilitating such change starts with how we see, listen to, and empower frontline staff. If we can understand the features of our operations, organizations, and overall system, that thwart their ability to build trust, gather insight, and better assess local needs it will inevitably guide us towards the changes we must make and enable frontline staff to fulfill their potential as arguably one of the most important resources in the humanitarian system. Critically, systematic change requires alterations across all the ways in which we work and at all levels: from the way frontline staff understand and are provided the resources and skills to ensure participation; to ensuring that our organizational processes embed key notions of participation, accountability, and frontline staff voice; and finally to shifting the structures of the humanitarian system from top-down, deterministic approaches, to ones that truly devolve power to local actors and people.

This Report seeks to marry the well-established research about what we know needs to happen – in terms of placing crisis-affected people at the center of our response efforts – with emerging insights about the drivers that either enable or hinder frontline staff in their daily efforts to strengthen participation. In this way, this Report offers suggestions into some ways we can start to make positive changes that empower frontline staff to enable strong, effective, meaningful participation with crisis-affected people.

Next steps

Findings from this Learning Report are informing the practical next steps for the E2E project as it seeks to equip humanitarian organizations with tools and a roadmap to empower frontline staff to enable greater participation of crisis-affected people. A series of workshops were held to validate the findings of this Report during which time researchers consulted humanitarian staff and actors on which guidance, tools, and resources they would find most useful and valuable in helping them to implement the three organizational changes outlined in the previous section.
Key resources highlighted through this process as being particularly needed, that will be investigated in the next phase of the E2E project include:

**CHANGE 1: SYSTEMATICALLY ENGAGE FRONTLINE STAFF IN DECISION-MAKING**

- Pilot projects where program design and decision-making power are transferred to frontline staff, assess the results, and share learning with the sector.
- Develop case studies that focus on the ways in which frontline staff have been successfully connected in organization and program design and decision making.
- Map the key points in the project cycle where frontline staff can be engaged and consulted in project design and management, and outline methods for how they can be engaged. This should include clarifying which decisions can be delegated to frontline staff and country level, with a commitment to devolve as much decision-making power as possible.

**CHANGE 2: STRENGTHEN UNDERSTANDING OF PARTICIPATION, AND HOW TO PUT IT INTO PRACTICE**

- Create guidance on how to include participation in program planning templates, assessments, monitoring and evaluation, budgets, and reporting templates.
- Develop practical, simple tools for enabling participation with crisis-affected people that frontline staff can easily use in their day-to-day work, identified and developed with frontline staff.

**CHANGE 3: INTEGRATE PARTICIPATION WITHIN ORGANIZATIONAL CULTURE AND PROCESSES**

- Generate organizational self-assessment tools and guides that help to identify gaps in how frontline staff and crisis-affected peoples’ participation is integrated in processes, programs, and organizational culture.
- Develop case studies about the practical ways organizations have changed culture to enable greater participation of frontline staff and crisis-affected people and the impact this has had.
- Create tools to support organizations to measure the quality of AAP and how well frontline staff are supported to enable participation, including objectives, KPIs, and how to audit this.
- Design guidance on a package of incentives to encourage leadership and managers to prioritize and better support frontline staff to enable the participation of crisis-affected people, including a requirement to spend time in communities on a regular basis and how they have enabled participation in their performance goals and appraisals.
- Create a briefing package for leadership on participation, what it entails and requires, how it can be supported at every level, and how they can lead by example.
- Establish a small working group bringing together AAP experts from donors and humanitarian organizations, to identify shared challenges, find practical solutions to overcome these, and implement some of the donor recommendations in the previous section. For example, approaches to prevent AAP becoming a tick-box exercise in donor proposals and reporting, mapping and addressing the real and perceived donor barriers to adapting programs based on changes in community context and needs, and developing donor AAP checklists for proposals and project monitoring.
Annex A:
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Annex B: Lines of Inquiry for KIIs

Lines of Inquiry
KIIS - IRC AAP E2E PROJECT

*Questions will vary depending on if the interviewee works for an organization, network, research/think tank etc. In addition, not all questions will be asked in each interview. Rather, below provides a guide of potential questions that might be asked, but the interviewer will allow the interviewee to guide the direction of the conversation depending on their interests, experiences, etc.

<table>
<thead>
<tr>
<th>Category</th>
<th>Question(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Institutionalization</td>
<td>With increasing emphasis on AAP across the sector, what has been your experience with institutionalization efforts within your organization or more broadly for the sector?</td>
</tr>
<tr>
<td>1a</td>
<td>What has worked well? For Whom? Why?</td>
</tr>
<tr>
<td>1b</td>
<td>What have been the biggest challenges? For Whom? Why?</td>
</tr>
<tr>
<td>2 Frontline Staff Engagement</td>
<td>How have these advancements at the global sector level or HQs level within the organization played out for frontline staff? What do you think the practical experience looks like for frontline staff to enable greater participation and implementing greater AAP within their programs and operations?</td>
</tr>
<tr>
<td>3 Enablers</td>
<td>What features within the organization, sector, or context enables frontline staff to encourage greater participation of crisis-affected communities? Why? Do you have examples of this?</td>
</tr>
<tr>
<td>4 Hinders</td>
<td>What features within the organization, sector, or context hinders frontline staff to encourage greater participation of crisis-affected communities? Why? Do you have examples of this?</td>
</tr>
<tr>
<td>5 Overcome</td>
<td>What needs to occur to overcome these barriers for frontline staff to better engage and encourage participation of crisis-affected people in humanitarian response? Why has this happened? What can be done?</td>
</tr>
<tr>
<td>6 Best Practices</td>
<td>What have you seen in terms of best practices, case studies, or tools that have been utilized to improve frontline staffs’ ability to encourage participation of crisis-affected communities?</td>
</tr>
</tbody>
</table>