Collective approaches to communication and community engagement

Models, challenges and ways forward

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**Acronyms**

- **AAP**: accountability to affected populations
- **C4D**: communication for development
- **CAR**: Central African Republic
- **CBPF**: country-based pooled funds
- **CCE**: communication and community engagement
- **CCEI**: Communication and Community Engagement Initiative
- **CDAC**: Communicating with Disaster Affected Communities (Network)
- **CEA**: community engagement and accountability
- **CERF**: Central Emergency Response Fund
- **CEWG**: Community Engagement Working Group
- **CHS**: Core Humanitarian Standard
- **CoP**: community of practice
- **CRM**: customer relationship management
- **CSO**: civil society organisation
- **CwC**: communicating with communities
- **DFID**: UK Department for International Development
- **DRC**: Democratic Republic of the Congo
- **FAQ**: frequently asked question
- **FCDO**: UK Foreign Commonwealth and Development Office
- **FGD**: focus group discussion
- **GoH**: Government of Haiti
H2H  Humanitarian to Humanitarian (Network)
HC   Humanitarian Coordinator
HCT  Humanitarian Country Team
HDX  Humanitarian Data Exchange
HRP  Humanitarian Response Plan
IASC  Inter-Agency Standing Committee
IDP  internally displaced person
IFRC  International Federation of Red Cross and Red Crescent Societies
IM   information management
INGO  international non-governmental organisation
IOM  International Organization for Migration
IIC  Internally Displaced Persons Information Centre (Iraq)
MSNA  multi-sector needs assessment
NDMA  National Disaster Management Agency
NEAR  Network for Empowered Aid Response
NGO  non-governmental organisation
OCHA  United Nation Office for the Coordination of Humanitarian Affairs
OPAG  Operational Policy and Advocacy Group
PMI  Indonesian Red Cross (Palang Merah Indonesia)
PSEA  protection from sexual exploitation and abuse
RC   Resident Coordinator
RCCE  risk communication and community engagement
SCHR  Steering Committee for Humanitarian Response
SMAC  Social Mobilisation Action Consortium
STAIT  Senior Transformative Agenda Implementation Team
UN United Nations
UNFPA UN Population Fund
UNICEF UN Children’s Fund
WASH water, sanitation and hygiene
WFP World Food Programme
WHO World Health Organization
Executive summary

The humanitarian system is not accountable at the collective level to the communities it serves. This is despite increasing collective approaches to communication and community engagement (CCE) that build on several prominent initiatives focused on making humanitarian action more accountable to affected populations and responding to their feedback.

UNICEF, on behalf of the former Communication and Community Engagement Initiative (CCEI), commissioned HPG in the spring of 2019 to identify solutions to current bottlenecks and challenges to collective approaches to CCE, develop evidence of their added value and limitations and highlight future implications, given the rapidly changing nature of humanitarian crises. This report synthesises research done in 2019 and 2020.

This study has found an implementation gap between policy and practice. Despite a strong body of guidance and policy papers on collective approaches to CCE (e.g. Austin, 2017; IASC, 2017; Peer 2 Peer Support, 2017; CDAC Network, 2019) and commitments at a global level, implementation was found to be sporadic. At the same time, humanitarian actors did perceive the benefits of a collective approach to CCE.

Collective approaches to CCE can add value to a humanitarian response by providing people with better quality and more consistent information, mitigating language and cultural barriers to information uptake, reducing over-burdening and assessment fatigue, improving understanding of people’s priorities and strengthening analysis and advocacy. On the back-end of collective approaches, they can add value for humanitarian organisations and agencies by reducing duplication and avoiding gaps, reducing costs by collaborating on common services, providing multiple channels of communication to increase inclusivity and effectiveness, as well as improving programming through understanding cross-cutting issues and trend analysis. Improved programming can lead to improved humanitarian access, security and acceptance by affected people.

Without collective accountability to affected people (AAP), humanitarian action is less likely to be relevant and effective for them. It is thus an essential part of humanitarian action and not only something that is ‘nice to have’. Underpinning its practical benefits, collective AAP is also an essential factor in meeting rights-based commitments that puts affected people and their needs at the centre of any response.

There are a number of reasons why collective AAP has failed to take hold: collective approaches to CCE are not understood in the same way by all stakeholders; they lack buy-in at the leadership level; they lack access to predictable funding; and they are not well informed by existing local CCE practices, in large part because they fail to adequately involve local actors, including government and non-governmental actors.

Humanitarian leaders must act urgently to ensure humanitarian responses are informed by the perceptions of affected people and are effective at communicating with and informing people affected by crises. Our study identified seven principles that make a collective approach to CCE effective:

1. Leadership commits to early and ongoing collective accountability.
2. Works with existing coordination structures and to allow cross-sectoral decision-making.
3. Builds on and complements individual accountability mechanisms.
4. Facilitated by individuals with leadership, coordination and technical skills.
5. Supported by buy-in from key stakeholders in the response.
6. Facilitates local leadership, engagement and capacity.
7. Adopts contextually relevant, inclusive and effective CCE practices.

Moving towards more community-led responses to humanitarian crises where decision-making is in the hands of those affected will ultimately solve part of the challenge of accountability. Until community-led responses become more widespread and the norm, the below recommendations are steps that could further enable the move from rhetoric to practice. These recommendations should be considered alongside the principles of effective collective approaches to CCE as well as existing recommendations in past studies (Austin, 2017; Peer-to-Peer Support, 2017; CDAC Network, 2019).

**Recommendations**

**To AAP and CCE communities of practice**

1. Prioritise engagement with response leaders outside of the AAP and CCE community of practice.
2. Initiate a dialogue with government counterparts, development actors and other stakeholders on collective approaches to CCE.
3. Work with other humanitarian reform processes and initiatives to join voices and push for change that would enable collective accountability.
4. Ensure that political economy and anthropological analyses inform the design of CCE mechanisms at both collective and individual agency level.

**To Humanitarian Coordinators, heads of agencies and INGOs and other actors in the formal international humanitarian system**

1. Use the principles above to put into action the commitments to collective AAP already made in the sector.
2. Advocate for and prioritise funding through pooled funds to support collective approaches to CCE.
3. Dedicate capacity, formal space and resources at the regional and global levels to support country-level implementation of collective approaches to CCE.
4. Invest in real-time monitoring and evaluation, and systematic analysis on how feedback from affected populations is used to improve the effectiveness of the response.

**To donors**

1. Commit to funding collective approaches to CCE with predictable and multi-year funding.
2. Demand more collective action including collective accountability indicators in strategic response plans and lobbying for accountability commitments from lead agencies.
3. Support the effective participation and leadership of local actors in collective approaches to CCE through donor funding policies and engagement.
4. Consider how development funding can contribute to collective approaches to CCE.
1 Introduction

The humanitarian system is not accountable at the collective level to the communities it serves. This is despite lessons from humanitarian responses showing that communities often view humanitarian actors and action interchangeably; they do not always distinguish between individual organisations in a response, nor do their needs fall neatly into individual sectors. As a result, there have been growing calls for improving accountability across a humanitarian response. As early as 2011, following the earthquake in Haiti, the Communicating to Disaster Affected Communities (CDAC) Network recommended that the Inter-Agency Standing Committee (IASC), non-governmental organisations (NGOs) and donors consider coordinating two-way communication as a vital part of any humanitarian response (Ljungman, 2012). There is now recognition that a collective approach can be more effective and holistic than agency or sector-specific approaches to reach collective accountability (Serventy, 2015; OCHA, 2016). Collective approaches to communication and community engagement (CCE) build on several prominent initiatives from the past few years that focused on making humanitarian action more accountable to affected populations and responding to their feedback. In 2014, the Core Humanitarian Standard (CHS) published nine commitments to improve the quality and effectiveness of humanitarian aid. Two of these – commitments 4 and 5 – state that communities and people affected by crises should have access to information, participate in decisions affecting them and have access to safe and responsive complaint mechanisms (CHS Alliance, 2014). In 2016, the Grand Bargain was launched following the World Humanitarian Summit and included a workstream – Workstream 6, entitled the ‘participation revolution’ – that deepened the commitment of the sector to include people receiving aid in making decisions that affect their lives (IASC, 2016). The following year, IASC published updated Commitments on Accountability to Affected People. Results Group 2 on accountability and inclusion is supporting the IASC in turning this commitment into practice.

In 2017, following a year-long, sector-wide consultation, the Communication and Community Engagement Initiative (CCEI) was established as a collaboration between the CDAC secretariat, the International Federation of Red Cross and Red Crescent Societies (IFRC), the United Nations (UN) Office for the Coordination of Humanitarian Affairs (OCHA) and the UN Children’s Fund (UNICEF), with a wider steering group composed of other CDAC members, CHS Alliance, the Network for Empowered Aid Response (NEAR) and the Steering Committee for Humanitarian Response (SCHR), among others.

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1 This observation has been borne out of the numerous case studies that were reviewed for this paper (see section 1.1) as well as other general studies on humanitarian aid (see, for example, Mosel and Holloway, 2019).

2 Collective approaches to CCE complement rather than replace individual or sector-specific approaches. However, they are more effective at reaching collective accountability than these individual approaches.

3 The IASC Operational Policy and Advocacy Group (OPAG) is a forum aimed at driving the normative and strategic policy work of the IASC. It encompasses five Results Groups: 1 on Operational Response; 2 on Accountability and Inclusion; 3 on Collective Advocacy; 4 on Humanitarian–Development Collaboration; and 5 on Humanitarian Financing. More information can be found at https://interagencystandingcommittee.org/operational-policy-and-advocacy-group.
The CCEI aimed to:

To help improve the quality and effectiveness of humanitarian and health emergency responses, through a harmonised, timely, systematic and predictable collective service for communication and community engagement with affected communities throughout all phases of the humanitarian programme cycle (CCEI, 2017: 1).

In early 2020, the CCEI was integrated under the IASC’s Results Group 2 on accountability and inclusion.

1.1 Study methodology

UNICEF, on behalf of the former CCEI, commissioned HPG in the spring of 2019 to identify solutions to current bottlenecks and challenges to collective approaches to CCE, develop evidence of their added value and limitations and highlight future implications, given the rapidly changing nature of humanitarian crises. This report synthesises the work that has been done over 2019 and 2020. This report is based on the following inputs:

- A desk-based review of literature initially undertaken between July and September 2019 and updated in May 2020.
- Nineteen inception interviews with steering group members and external key informants from UN agencies, INGOs, the Red Cross Red Crescent movement, networks and service providers, conducted between July and September 2019.
- Five case studies, which have been published separately:
  - Central African Republic (CAR) (Barbelet, 2020)
  - Democratic Republic of Congo (DRC) (Dewulf et al., 2020)
  - Indonesia (Holloway and Fan, 2020)
  - Mozambique (Lough et al., 2020)
  - Yemen (El Taraboulsi-McCarthy et al., 2020).
- A cost analysis of collective approaches to CCE (Lough and Spencer, 2020).
- Desk-based reviews of previous collective approaches to CCE.
- Seventeen final interviews with steering group members and other key informants, conducted in June 2020.

The five in-depth case studies that underpin this synthesis used qualitative approaches – interviews with key stakeholders and focus group discussions (FGDs) with affected communities – to analyse how collective approaches to CCE were (or were not) implemented in each context and the impact they had on the response. The case studies exemplify a variety of crises and contexts, and each offers insight into different leadership and coordination challenges as well as the pros and cons of top-down and bottom-up approaches in contexts where levels of government influence and support vary.

- The humanitarian response in CAR was chosen as a complex protracted conflict setting with strong buy-in for collective approaches to CCE from the established humanitarian presence (Barbelet, 2020).
- The Ebola response in North Kivu, DRC represents a large-scale public health emergency within a conflict-affected context (Dewulf et al., 2020).
- The response to the Central Sulawesi disaster in Indonesia offers an insight into a locally led humanitarian response where there is a strong, functioning government in charge and a heavy pre-existing presence of local, national and international aid actors (Holloway and Fan, 2020).
- The response to Cyclone Idai in Mozambique was selected as a rapid scale-up, natural hazard-related disaster with a substantial international response in a context where the international presence only existed in other parts of the country prior to the disaster (Lough et al., 2020).

4 This work started and research was largely completed prior to the Covid-19 crisis. Thus, this report does not touch on remote collective approaches to CCE. For more on collective approaches and Covid-19, see Lough and Holloway (2020).
The humanitarian response in Yemen is one of the largest and most challenging humanitarian contexts in the world: an acute civil war that has become protracted, with both public health crises and displacement (El Taraboulsi-McCarthy et al., 2020).

These case studies have been supplemented by previous reviews of collective approaches to CCE in other types of crises and contexts, including the earthquake and cholera response in Haiti in 2010; the response to the Pakistan floods amid conflict-induced displacement in 2010–2011; Typhoon Bopha in the Philippines in 2012; the national platform Shongjog in Bangladesh, established in 2013; Typhoon Haiyan in the Philippines in 2013; the Iraq Internally Displaced Persons Information Centre (Iraq IIC), established in 2014–2015; the Ebola outbreak in Guinea, Sierra Leone and Liberia in 2014–2016; the earthquake in Nepal in 2015; Hurricane Maria in Dominica in 2017; the Rohingya response in Bangladesh from 2017–present and the humanitarian crisis in and mixed migration from Venezuela from 2018–present.
2 What are collective approaches to communication and community engagement?

Over the past few years, collective approaches to CCE have been discussed in commitments and written in policy, if not implemented in practice. According to one donor interview, ‘collective approaches are the next frontier and where things are going’. The trend towards collective approaches to CCE and collective accountability is indeed unlikely to slow down, as is clear from operational guidance and the work carried out under the Grand Bargain. The second commitment of the ‘participation revolution’ workstream of the Grand Bargain is to ‘develop … a coordinated approach for community engagement and participation … supported by a common platform for sharing and analysing data to strengthen decision making, transparency, accountability and limit duplication’ (IASC, 2016: 10). Similarly, the commitment to ‘a collective approach to accountability to affected populations (AAP) for engaging with, ensuring feedback to and adjusting the response based on the views of affected people’ has been in the terms of reference for Humanitarian Country Teams (HCTs) since February 2017 as a non-negotiable element of their work, alongside commitments around gender-based violence, protection from sexual exploitation and abuse (PSEA) and protection (IASC, 2017: 4). As of 24 April 2020, 90% (19 of 21) of Humanitarian Response Plans (HRPs) assessed by the UK Department of International Development’s (DFID) Payment-by-Results framework included a joint approach to accountability, communication and feedback systems (OCHA, 2020) – although there are doubts as to the extent of implementation and how far these approaches could be considered effective collective approaches to CCE. In addition, there is little consensus over what such a joint approach would entail or look like in practice.

2.1 Definitions and distinctions

Since collective approaches to CCE are relatively new, a single definition has yet to be agreed. While an exact definition may not be necessary, language matters as it can lead to greater clarity and acceptance on the ground, and the advancement of different components of the collective approach. The following definition builds on the working definition used for the case studies, reflecting the development of our thinking and understanding throughout the project’s duration. While evidence clearly outlines the need to support better understanding and clarity of what collective approaches to CCE are, the research team

5 DFID was merged with the UK Foreign and Commonwealth Office at the time of this research and is now a new entity named the Foreign Commonwealth and Development Office (FCDO).
does not advocate for the need for a single definition.\(^6\) For the purpose of this report:

A collective approach to CCE is a multi-actor, multi-service initiative that encompasses the humanitarian response as a whole, rather than a single individual agency or programme. It focuses on two-way communication: providing information about the situation and services to affected communities; gathering information from these communities via feedback, perspectives and inputs; using that information to shape and modify the response and closing the feedback loop by informing the communities as to how their input has been taken into account. The goal of a collective approach to CCE is the increased accountability to and participation of affected communities in their own response.\(^7\)

This definition combines the essential elements of a collective approach. First, it must be multi-actor and multi-service. This should go beyond two or three UN agencies or NGOs coordinating their CCE approach, creating an inter-agency hotline or running a community engagement working group (CEWG). Rather, it should include multiple types of actors – including UN agencies, INGOs, the Red Cross Red Crescent movement, government officials, national and local NGOs, service providers, media, civil society organisations (CSOs) and religious groups. As an INGO worker stated: ‘It must encompass more than one particular chunk, so UN system, NGOs, the Red Cross Red Crescent movement, local government, etc. I wouldn’t count something that’s just UN agencies as collective… Only four NGOs doesn’t count because it doesn’t take into account the diversity of the ecosystem’. Similarly, the CDAC Network has espoused that a collective response requires ‘the collaboration of a diverse set of humanitarian, communication and technology actors’, including governments, national NGOs and INGOs, the Red Cross Red Crescent movement, UN agencies, media development agencies, media, technology providers and the private sector (CDAC Network, 2019: 14). Furthermore, these multiple types of actors should collaborate on an approach that encompasses more than one common service (see sub-section 2.1.1).

Second, a collective approach to CCE is holistic and considers the entire response, rather than focusing on a single agency or sector. Affected people’s needs stretch across multiple sectors, and it is unnatural to give them information and divide their feedback into silos to conform to the setup of the humanitarian system. In most humanitarian situations, affected communities are unlikely to know the mandates and remits of individual aid organisations; finding the appropriate organisation to provide feedback to can waste time and lead to frustration with the overall response (for example, in the case of IDPs in northern Iraq (Inter-Agency Team, 2014) and in Kachin State (Husni, 2020)). Moreover, siloed organisations typically do not have a broad sense of a response’s effectiveness as they do not know how or if their respective efforts fit together. In a collective approach to CCE, then, according to a member of the Red Cross movement, ‘it is critical to bring together actors who see themselves working in different areas’. By doing so, the result can be, as an INGO worker explained, ‘something that is bigger than what they would do by themselves’.

Third, a collective approach must focus on two-way communication: humanitarian organisations providing information to affected communities, affected communities providing feedback and complaints to organisations.

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\(^6\) Agreeing a definition brings with it challenges when implementing a collective approach. For example, a rigid definition may not translate well in the various contexts where humanitarian actors are operational and can result in certain forms of collective CCE already undertaken by local actors not being recognised by international actors at the outset of a crisis.

\(^7\) This definition has been modified slightly from the one that appears in the case studies for this project, reflecting the thinking and understanding that has occurred throughout this work.
organisations using that feedback to modify the response and then closing the feedback loop by communicating to the communities how it has done so (or explaining why it was unable to do so). This feedback should then be analysed collectively, so, as one interviewee highlighted, ‘all the agencies involved have an overview of the community feedback and complaints and opinions on a given area of the response’. Feedback can also be used by response leadership as a metric of performance to monitor whether response objectives are being met, although the objective of collective approaches to CCE is to ensure accountability, participation and uphold the right to information of those affected by crises, rather than monitoring and evaluation. Closing the feedback loop is vital to ensure accountability and build trust with communities so they feel they have agency over their own response and continue to provide feedback.

Finally, the goal of a collective approach should be increased accountability to and participation of affected people, more than any cost benefit or efficiency gains that may also result from using a collective approach. A collective approach should reduce the burden on affected people because it limits assessment fatigue, reduces the need to chase specific agencies to give siloed feedback and allows people to have a stronger voice in shaping their own response. Or, in the words of one UN worker: ‘In an ideal world, we’d be doing it for people, but in reality, there are a lot of cases where we do it for us. But maybe it’s between the two, so it takes into account affected populations and organisations’.

Collective approaches do not negate the need for individual agency approaches, but they should complement them and enhance the whole response through amplifying common problems identified through holistic trend analysis. The collective approach, then, ‘is not an alternative’, as one service provider explained and ‘not an either/or’ as a UN worker put it, but rather ‘it just provides an umbrella and an opportunity to provide top line information to communities … [and] overriding/overarching messages and to know the overall response is working well’. Similarly, a UN worker explained: ‘The collective approach is not just about combining agency efforts … For this reason, it has the potential to have impact on masses of people who are impacted by the crisis but may not be direct beneficiaries of individual agencies’.

2.1.1 Common versus collective, collaborative and coordinated

A common service is a single mechanism for the benefit of multiple stakeholders; for example, a single hotline set up by multiple responders. By using the idea of common services, types of collective approaches can be either collective, collaborative or coordinated. As mentioned above, collective approaches combine multiple services (common and individual) that involve and engage multiple types of stakeholders while informing the overall response. They incorporate not only common feedback mechanisms, such as a common hotline, but also consider feedback provided through suggestion boxes, hotlines or in FGDs to individual agencies regarding the overall response. This individual feedback is often collated in working groups in order to analyse big trends across multiple sectors.

By contrast, coordinated approaches involve multiple mechanisms and services (common or individual) for the benefit of a smaller group of stakeholders (or single type of stakeholders – i.e. only UN agencies), such as whole-of-response and individual message libraries, hotlines and perception surveys for UN agencies. Collaborative approaches comprise multiple types of stakeholders working together on a smaller number of services and mechanisms, such as a single common hotline used by government officials, UN agencies, NGOs and local actors. The matrix in Figure 1 demonstrates this distinction and will be referred to in later discussion (see section 3.2).

The categorisation of CCE approaches and exact terms used are less important, however, than the ideas they represent. Labelling approaches as either collaborative or coordinated clarifies that these approaches are not collective – either because they do not involve enough different types of stakeholders working together on CCE, or because they do not share enough common services to ensure effective two-way communication. In order to be a collective approach to CCE, the approach
must be multi-actor, tackle collective problems, with collective action based on two-way communication, to meet collective outcomes.

2.1.2 Terminology and turf wars
A key limitation to implementing collective approaches in humanitarian responses is that there is no agreed-upon definition of CCE, nor is the acronym CCE used consistently. For example, various agencies use the terms communicating with communities (CwC), communication for development (C4D), community engagement and accountability (CEA), risk communication and community engagement (RCCE) and CCE. This has resulted in different agencies being unable to work together due to disagreement over what should be prioritised and who should lead, and confusion on the ground when these words are translated into other languages.

Interviews highlighted that this variance says more about organisations and agencies staking their own claim than any real difference in meaning. Indeed, these terms are often used synonymously, even if organisations lay out specific reasons for their choice of one term over another. All have the same focus on enabling AAP and participation, coordination and communication, community engagement, the two-way exchange of information, supporting community communication needs and using this information to shape the response (Iacucci, 2019).

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8 AAP is typically seen as an overarching objective to have more accountable and relevant humanitarian responses. The other terms are seen as a vehicle to achieve AAP. CwC and the communication aspect of CCE put a particular emphasis on communication as aid that goes beyond accountability to also incorporate the population’s communication needs (including access/ability to communicate with others, such as friends and family). CEA and CCE focus also on community engagement as a means to achieve a more accountable response in ways unexpressed by CwC or C4D. Finally, C4D and RCCE focus more on behaviour change and public health.
Arguments over the different terms used to refer to CCE within the humanitarian community have occasionally prevented CCE from being done well – and collective approaches from moving forward – as those tasked with AAP, C4D, CEA and CwC may not feel they are working on the same agenda. According to Austin (2017: 15), ‘the use of different terminology creates misunderstanding and confusion within and between agencies and with affected populations’. Indeed, one of the limiting factors in the Typhoon Haiyan response was the initial creation of separate technical working groups for CwC and AAP, which led to unnecessary silos despite significant overlap between their activities; the two groups were eventually merged (CDAC Network, 2014).

Outside of the international humanitarian community, different acronyms become even more problematic. As one UN worker remarked: 'The chase for the definition is very Anglophonic. What is accountability in French, once you translate it, does not work. Engagement, involvement, participation, talking, listening then – that is much more important. The definition should come up locally. If we are going to take the localisation angle, then it is called something else somewhere else ... It should be locally owned and locally understood. Whether somebody calls it AAP and another CCE, just do it. We are never going to get the terminology down ... The quest for a definition is so hegemonic, so Western.'

This Western focus is often at odds with what is happening on the ground in many humanitarian responses. As a UN worker noted, ‘There must be examples of things not driven by internationals, but I can’t think of any ... this concept is part and parcel of the international response toolbox, including the terminology we use, so there’s likely similar things but called by different names that we’re not aware of’. Another UN worker agreed: ‘That is not to say that CSOs are not accountable, but they are not always able to articulate it in our language’. Many respondents noted an increase towards going ‘by what the country wants to call it’, so that it is clearly understood and useful in the context. In CAR, for example, the Working Group on CCE was renamed the Working Group on AAP because AAP was the language used and understood in country (Barbelet, 2020).

Governments’ and local organisations’ lack of knowledge of humanitarian jargon – and internationals’ lack of acknowledgment that locals are likely doing similar things under different names – was also apparent in the other four in-depth case studies. For example, in DRC, misunderstanding what RCCE should entail resulted in a narrow focus on communication at the expense of accountability and community engagement (Dewulf et al., 2020). In Indonesia, many respondents did not understand the term CCE, even though many local organisations claimed that community engagement was inherent in their nature (Holloway and Fan, 2020). In Mozambique, the lack of shared understanding of effective CCE between humanitarian actors and the government led to the government’s limited engagement (Lough et al., 2020). In Yemen, lack of understanding resulted in a disconnect between theory and practice; yet due to security concerns and access constraints, local actors and intermediaries were often the only humanitarian actors able to engage face-to-face with affected communities (El Taraboulsi-McCarthy et al., 2020).

Most critical, perhaps, is the distinction and disengagement between those working on CCE (or one of its various acronyms) and those working on RCCE in public health crises. This is largely due to a lack of understanding by traditional humanitarian actors of existing platforms within the World Health Organization (WHO) – the lead organisation in a public health response. Though CCE and RCCE have slightly different aims and activities (as outlined in chapter 3) due to context, they should interact, collaborate and build on what is already in place. However, duplicate structures are common. For instance, in the DRC Ebola response, duplications of dedicated working groups on RCCE led to a fragmentation of capacities and activities that ultimately undermined the effectiveness of the response (Dewulf et al., 2020). In Indonesia, the CEWG set up for the Central Sulawesi response was reactivated in light
of the Covid-19 outbreak, but struggled to be acknowledged by the existing response structure (Holloway and Fan, 2020). The community of practice resulting from the CEWG was formalised in the national structure under the Displacement and Protection Cluster, led by the Ministry of Foreign Affairs. Yet, a separate RCCE Working Group was established for Covid-19 within the specific RCCE response structure, which is led by the National Disaster Management Agency (NDMA). In this parallel and new structure, community engagement is a sub-group of the RCCE Working Group. Similar duplicate structures have appeared in Covid-19 responses in South Sudan and Iraq, though in Afghanistan, RCCE is a sub-group of the AAP Working Group.

Finally, confusion over terminology is compounded by the introduction of another concept: collective approaches to CCE. Many interviewees for this project and the case studies were not clear on what was meant by ‘collective approach’, with many using ‘collective’ and ‘common’ interchangeably. As one UN worker stated, ‘When you refer to collective approaches, it’s by and large thought to be about general feedback mechanisms that allow for communities to give feedback that is then sent to the individual agency’. Unless humanitarian actors and national authorities understand what a collective approach is then progress is unlikely to be made.

2.2 Perceived added value of collective approaches to CCE

The lack of systematic and effective implementation of collective approaches to CCE over time makes it difficult to identify their added value. Anecdotal evidence has, however, hinted at its perceived potential value, especially around effectiveness: collective approaches to CCE should lead to an improved, more relevant response based on feedback from affected people, via multiple actors and sectors, should inform HCT decisions and create a better-quality response with more impact (Austin, 2017). As one UN worker explained, a collective approach allows humanitarian actors to ‘triangulate information to provide comprehensive recommendations to the teams to adjust the response’. Another UN worker described this as ‘having a bird’s eye view of the issues’, which included ‘understanding cross-cutting issues, understanding areas that are weak, understanding PSEA cases, trend analysis, collection of evidence to inform programming, the ability to hold everyone to account [and] a better picture of how feedback is used to adjust programming’.

Better programming, in turn, can lead to improved humanitarian access, security and acceptance by affected people, since ‘acceptance-based access strategies require a solid and up to date understanding of the perceptions of affected people’ (STAIT and IASC, 2017: 1). In CAR, improved access via increased community acceptance was a driving force behind the collective approach to CCE (Barbelet, 2020). In the eastern DRC Ebola response – the first Ebola outbreak in a conflict zone – initial efforts focused on counterthreats in order to overcome security and access challenges, rather than relying on community engagement acceptance strategies traditionally employed by humanitarian actors, though this gradually shifted as RCCE was furthered integrated into the response (Dewulf et al., 2020).

For affected people, the main benefit of a collective approach to CCE is its coherence and neutrality. For people affected by disaster, conflict or displacement, information is critical and accurate messages consistently shared in a coherent manner though a collective approach to CCE can ease confusion and provide much-needed clarity (CCEI, 2017; CDAC Network, 2019). Incorporating common services, such as whole-of-response hotlines, can also be beneficial – for instance, a proliferation of hotlines often result in under-serviced resources that are not manned or funded appropriately, causing affected people to feel frustrated if no one picks up or when it is not clear which one to use. A study on community feedback mechanisms in Afghanistan, Somalia and Syria found that respondents wanted regular communication

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9 This section speaks to the perceived added value, rather than proven, because the collective approaches under review were either insufficiently advanced and/or were not informed by sufficient community feedback to provide evidence.
and engagement to discuss general concerns unrelated to specific agencies or projects with actors not directly associated with programme implementation (Ruppert et al., 2016). To this end, perception surveys run by non-operational organisations offer an opportunity for independent organisations to proactively engage communities and solicit feedback.

Other potential benefits relate to further efficiency gains, both for the affected population and organisations, through a reduced number of assessments and quicker turnaround time on feedback and complaints. When organisations collaborate on joint needs assessments, or when an assessment done by one organisation is shared with others, the risks of the same people being asked the same questions by different organisations is reduced (Austin, 2017; CCEI, 2017; CDAC Network, 2019). Moreover, if an organisation receives feedback or a complaint about an area outside their mandate, this can be more easily shared in a collective approach, rather than the person having to go through a referral process until their complaint reaches the right organisation.

Cost efficiency was also mentioned in inception interviews and case studies as a potential added value, as a common service can be more cost-efficient than each agency having their own mechanism. This enables multiple channels for two-way communication, which allows more people to access them. In addition, having high-quality common services can expand the reach of CCE mechanisms to smaller agencies that would not otherwise be able to afford them. Conversely, some stakeholders have found coordination for collective approaches more expensive due to the need for dedicated capacity and human resources to run it. Engaging in collective approaches can in some cases be seen as a drain on resources due to the level of commitment involved, especially when reaching consensus; activities such as common mechanisms can often be a slow and laborious process.

On a final note, the main added value of a collective approach to CCE is that it is, in the words of one donor, ‘the right thing to do’ as it contributes to a rights-based response and helps put affected people and their needs at the centre. CDAC’s how-to guide to collective CCE notes that it is a crucial for people to receive the information they need, know their rights and entitlements, shape the response and raise complaints when necessary – often through common feedback mechanisms that enhance accountability, rights, transparency and service improvement (CDAC Network, 2019). Similarly, Peer 2 Peer Support (2017: 1) affirms that ‘central to human dignity is informed consent and accountability which necessitates that people have access to adequate information and can influence decisions that impact them’.

Yet, although the aim of collective CCE is increased accountability to and participation of affected populations, this ethical imperative was rarely mentioned as a benefit in inception interviews or throughout the case studies. In particular, the participation of affected people has not been prioritised in the design and implementation of collective approaches to CCE, and in certain contexts this has resulted in affected people not being included in the collective. Slow implementation of the commitments made under the ‘participation revolution’ workstream has been criticised in all four annual independent reviews of the Grand Bargain (Derzsi-Horvath et al., 2017; Metcalfe-Hough et al., 2018; 2019; 2020). The most recent review noted that organisations struggle to implement this workstream consistently in their programming and there remains a gap between how well they believe they are doing and how well they are perceived to be doing by aid recipients (Metcalfe-Hough et al., 2020). This assessment is confirmed and validated by numerous others, including a review of community feedback mechanisms in Afghanistan, Somalia and Syria. Each mechanism varied remarkably in its style and approach, but the perception of the community in each context was surprisingly similar. In no context did affected people feel they were involved enough in the planning of projects, follow-up or opportunities to provide feedback (Ruppert et al., 2016).

In literature and fieldwork for this study, rarely did the understanding of participation in a collective approach reach beyond modifying the response based on assessments, feedback
and complaints, if that. Following Hurricane Maria in Dominica, a CDAC Network review found that individual organisations’ community feedback mechanisms tended only to involve asking communities if they were satisfied or not with the programmes and for feedback on the quality and effectiveness of aid, though some collective community feedback by Ground Truth Solutions and CDAC Network led to modifications (Routley, 2018). In Indonesia, the response to the Central Sulawesi earthquake was not significantly modified based on the information provided by affected communities through the collective approach beyond one change regarding temporary shelters (Holloway and Fan, 2020). In Yemen, the most striking evidence that the collective approach had not had an impact was the limited engagement of affected communities in shaping the kind and amount of aid they receive (El Taraboulsi-McCarth, et al., 2020). While collective approaches have the opportunity to elevate affected people’s voices and collate feedback into bigger trend analysis, the system remains designed by the humanitarian sector and typically subject only to minor tweaks based on participant feedback. Whether, to what degree and in which ways collective approaches can lead to greater effectiveness requires further analysis and evidence.
This section uses the case studies undertaken for this project and the desk-reviewed studies of other collective approaches to CCE to analyse different models and the factors determining what may be feasible and beneficial in a given context. Based on the type of crisis or context, collective approaches to CCE can vary in terms of how collective they are, how integrated into the overall humanitarian coordination system they are, the type of leadership and coordination mechanism they employ, the range of activities and information management (IM) they involve, what activities get implemented first and the scale of cost and source of funding they have (or have not) obtained. With all these variables there is clearly no ‘perfect’ model. Instead, as a UN worker stated, ‘it should be adjusted, tailored, open to discussion because that’s what successful AAP looks like’.

3.1 Type of crisis

Bigger and more protracted crises, such as the ongoing conflict situation and internal displacement in CAR, can handle a more detailed and involved approach to collective CCE. In CAR, the humanitarian architecture is well established and the collective approach to CCE has buy-in at the highest level (HCT). In this context, the approach benefits from being top-down and HCT-led because it directly feeds into decision-making (Barbelet, 2020). Responses to non-conflict situations, such as refugee crises, may mimic responses to other protracted crises if the displacement is relatively settled, such as the Rohingya in Bangladesh or IDPs in Iraq (Taminga and Nuñez, 2018; Lancaster, 2019). If, on the other hand, displacement is more reactive and shifting due to an ongoing conflict in an intensely politicised crisis, such as in Yemen or Syria, the collective approach will need to be nimbler, more flexible and rely on remote methods of communication and interaction with affected people. Information about the crisis and response and the needs of the affected population are likely to change rapidly in such contexts (El Taraboulsi-McCarthy et al., 2020).

In protracted crises, national governments may or may not be involved and the pre-existing humanitarian presence may be weak or strong – all possible combinations of these two variables exist. While the government is an important actor and should lead (or at the very least, be part of) the collective approach to CCE, accountability systems can be more difficult if the government is also a party to the conflict. In Yemen, for example, INGOs and UN agencies’ perceived lack of neutrality, due to their partnerships with various government authorities or politically aligned local organisations, has led to a lack of trust in them and a breakdown of CCE (El Taraboulsi-McCarthy et al., 2020).

Responses to sudden-onset natural hazard-related disasters, such as in Mozambique and Indonesia, necessitate an approach that can get off the ground quickly and can (ideally) be paused and restarted as needed. This is particularly
true when the hazard is well known and likely to occur repeatedly, such as with cyclones in Mozambique and Bangladesh, typhoons in the Philippines, hurricanes in the Caribbean and, at a lesser frequency, earthquakes in Nepal and Haiti. Well-known hazards offer the opportunity to build on past experience and embed collective approaches to CCE into preparedness plans, which would enable them to begin soon after a disaster (Ford and Khajehpour, 2018).

Finally, CCE in public health crises must start quickly and focus more strongly on community engagement to enable effective risk communication, or behaviour change, than other contexts. This has led to the use of the term ‘RCCE’ in these contexts. In these crises, the country’s Ministry of Health, alongside WHO, plays a critical role in managing the design and dissemination health messages and preventing the spread of diseases. Anthropologists and translators should also be consulted and engaged on how best to disseminate information, engage communities and manage rumours. Their role is especially critical in a public health emergency like Ebola, where the disease is still not well known in many areas that experience outbreaks (Hasan, 2019; Dewulf et al., 2020).

Moreover, new public health crises may necessitate new ways of working. In the case of the Covid-19 pandemic, the global spread of the disease, along with restrictions on travel and access linked to social distancing and lockdowns, has resulted in an opportunity to rethink how collective approaches to CCE are designed, resourced and implemented (Lough and Holloway, 2020).

### 3.2 Degree of collectivisation

Depending on the context and crisis, the most collective approach – involving all actors and all services – may not be ideal. A coordinated model, involving fewer actors and more services, may work better in contexts where the government is involved in the conflict. In contrast a collaborative model with more actors and fewer services might be more appropriate in a natural hazard-related disaster or a short-lived public-health emergency where it is important to secure the buy-in of many key stakeholders, but there is little time or inclination to set up more than a few common services. If, however, a conflict is complex and fast-moving, and neither services nor actors can be secured, a minimal collective approach should be the focus.

In Figure 2, the five in-depth case studies reviewed for this project have been plotted on the matrix laid out in sub-section 2.1.1 (Figure 1).10 The approach in CAR is arguably the most collective – involving the most services (perception surveys, information and feedback centres, radios and listening groups, phone booths, rumour tracking and a hotline) and types of stakeholders.11 Though there is a lack of government involvement, the approach includes local organisations, and one national NGO (Réseau des Journalistes des droits de l’Homme) is an active member of the working group and implements one or more common services (Barbelet, 2020). The approaches in Mozambique and Indonesia, on the other hand, fall shy of being collective – and are more accurately coordinated approaches – because government officials (in a context where it was appropriate to have their involvement) and local organisations were not involved in the leadership or implementation (Holloway and Fan, 2020; Lough et al., 2020). By contrast, the Ebola response in the DRC involved many actors, including the government and local organisations, but shared few services, making the approach more collaborative than collective (Dewulf et al., 2020). Finally, due to the security constraints and political sensitivities in Yemen, the collective approach there has struggled to involve multiple actors or share services, resulting in an individual approach to CCE (El Taraboulsi-McCarthy et al., 2020).

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10 Because we did not do the in-country research for the other case studies referred to in this report, we have chosen not to plot them on the matrix.

11 At the time of the study in November 2019, the collective approach in CAR was implemented to a limited extent with most of these services in the plans. Only perception surveys and the integration of AAP questions in the Humanitarian Needs Overview and related indicators in the Humanitarian Response Plan were in place.
3.3 Extent of integration in government coordination and humanitarian architecture

3.3.1 Integration in government coordination
While not possible or desirable in all circumstances (such as conflict settings where the government is party to the conflict), government coordination should be prioritised where possible, as it can increase and ensure buy-in at the decision-making level and institutionalise the concepts of communication, accountability and engagement with affected populations in future responses. For example, in Pakistan, the call centre created during the 2010–2011 floods to inform people and provide redress mechanisms for the government’s Citizens’ Damage Compensation Programme ‘proved a useful tool and became a full, permanent component of the overall disaster risk management strategy of the Government of Pakistan’ (Global Cluster for Early Recovery, 2016: 10).

In Bangladesh, the multi-stakeholder platform Shongjog (Bangla for ‘linking’) that developed from the CwC in Emergencies Working Group in 2015 is an example of a collective approach being integrated into the government coordination. The government chairs the platform and members of the Shongjog platform were involved in revising the government’s national Standing Orders on Disaster and have developed an emergency message library, which has the formal endorsement of the Department for Disaster Management (Baksi, 2017; Ford and Khajehpour, 2018). Other examples include the national-led CCE platforms in Fiji and Vanuatu, which both involve the government leading or co-leading at multiple levels of the platform (CDAC Network, 2020).
3.3.2 Integration in humanitarian architecture

In the majority of humanitarian crises, the response is managed by a humanitarian architecture within which collective approaches to CCE must be integrated. Where CCE should fit within the humanitarian response system – either at the HCT level, the inter-sector level, as a separate working group or cross-cutting issue that is taken up by all sectors – has been the subject of much debate. However, as with the extent of collectivisation, there is no single perfect answer. The intricacies of each response will determine where the collective approach to CCE should sit.

As HCTs rework their CCE strategies to align with the 2017 terms of reference that call for collective approaches to AAP (IASC, 2017), implementing collective approaches under a shared compact endorsed by the HCT, as in CAR, is likely to become increasingly common. Here, the Working Group on AAP implements the collective approach and sits at the inter-cluster level (Barbelet, 2020). Though not yet fully implemented, this form of integration has potential to achieve the aims of collective AAP and works in a context where the crisis is protracted and the HCT is well established.

Having CCE working groups at the inter-cluster level and led by a UN agency is one of the most common models of collective approaches to CCE (as has been the case in Haiti, the Philippines and Bangladesh). In Bangladesh, the working group has its own reporting section in the weekly situation reports and has a dedicated section and budget line in the Joint Response Plan (Buchanan-Smith and Islam, 2018). While this gives it prominence within the response, it has also seen accountability siloed and relegated to a working group, rather than ensuring it is the responsibility of the entire response. In other responses, CCE is treated as a separate working group not attached to cross-cluster or cross-sectoral coordination structures. In Indonesia, this separation led to a duplication of meetings, as those who attended the CCE Working Group had to attend other cluster or sub-cluster meetings also (Holloway and Fan, 2020). This research clearly highlighted the necessity of ensuring that the collective approach to CCE, whether through a working group or other means, is linked into a cross-sectoral, response-wide coordination mechanism so as to share information fast and effectively across the response as well as inform sectoral strategies and responses.

3.4 Type of leadership and coordination mechanism

3.4.1 Leadership of the collective approach

While the responsibility for a collective approach to CCE ultimately lies with those leading the response – whether a government, an HCT or a group of local organisations – its day-to-day implementation and management requires dedicated leadership capacity. This has mostly materialised as chairing or co-chairing a working group. Whoever has the highest degree of capacity and relationship with affected communities in a given context should lead the collective approach. While in non-conflict contexts this should be the government, the majority of collective approaches analysed for this study were co-chaired by either OCHA or UNICEF (in CAR, Indonesia, Mozambique, Nepal, Philippines, Venezuela and Yemen). Though these are seen as the two main players on the CCE stage, they do not always work well together, due to what one interviewee called ‘politics between the big UN agencies … particularly turf wars between UNICEF and OCHA’. Rather than joining forces towards a shared goal, this competition has hindered progress, and there are pros and cons for the leadership of each organisation in different contexts. OCHA's mandate on humanitarian coordination fits with the collective approach to CCE and it is seen as being able to safeguard its collective nature and provide a semblance of neutrality since it is not an operational agency. However, OCHA is not always geared towards supporting operational activity on the ground, nor does it always have the right experience or technical knowledge to lead on CCE (see, for example, Barbelet, 2020). UNICEF, in contrast, is often well positioned to take the lead due to its experience with C4D, but its operational
mandate has led to perceptions of bias (see, for example, Nepal Common Feedback Programme, n.d.; Dewulf et al., 2020; Lough et al., 2020).

Regardless of who leads a response, governments, organisations and agencies need to maintain clearly defined roles and responsibilities, based on their individual capacities. In Indonesia, for example, ‘OCHA provided technical support through a series of secondments of CCE regional and global experts, UNICEF provided financial support for these secondments and IFRC/PMI [Indonesian Red Cross] operationalised the effort’ (Holloway and Fan, 2020: 12).

Only a few working groups or common platforms have been actively co-chaired by the government, such as Shongjog in Bangladesh, the responses to Typhoon Bopha and Haiyan in the Philippines and Ebola responses in Liberia and the DRC. Government-led or UN-led leadership structures can both lead to a top-down approach. While this can raise the profile of CCE and embed it within a humanitarian response, it is not without its drawbacks. In Nepal, for example, the location of the Common Feedback Project within the office of the Resident Coordinator (RC)/Humanitarian Coordinator (HC) gave it daily access to the central coordinating body and the office of the RC and supported the perception that it was multi-sectoral and credible, but it also meant that it was slow to get off the ground and ran into internal UN obstacles and delays (Nepal Common Feedback Programme, n.d.). In the Rohingya response, the top-down approach has been described as having ‘a persistent attitude that communities affected by the crisis are too shocked and helpless to take on responsibilities’ (Taminga and Nuñez, 2018: 28). Thus, using a top-down approach to ensure buy-in can often come at a cost of reduced participation of affected communities – a fundamental goal of the collective approach to CCE.

Other leadership models that have worked well in the past include the CDAC Network – a network of local and international NGOs together with UN agencies – such as in Haiti, Dominica and Mozambique. Because it is a network of multiple actors, the organisation best placed on the ground is often chosen to lead the collective approach. For example, in Haiti in 2010, Internews led rather than OCHA, because they had the largest field presence in communication (Ljungman, 2012). Yet, the CDAC Network has not always been capable of fulfilling this coordination role due to a lack of predictable and sustained funding, which tends to be channelled through single UN agencies rather than to networks.

3.5 Range of activities and information management systems

3.5.1 Activities
At a minimum, CCE incorporates three key types of activities: sharing information, collecting feedback to inform action and closing the feedback loop. These activities are only effective if the information they gather is analysed and communicated to the response leadership to inform strategic and programmatic decisions, including decisions to take corrective actions. In addition, such activities must be based on an understanding of people’s preferred communication channels facilitated by an assessment or a review of existing knowledge. In a collective approach, common services add value to the overall response, but they are complementary to the mechanisms and processes used by individual organisations and agencies, rather than replacing them completely. Generally, using multiple accessible communication channels will help ensure that information reaches more people and those people have an opportunity to provide feedback that is used to improve the response or lodge complaints. Indeed, as noted above, an added value of collective approaches to CCE is their ability to deploy multiple channels of two-way communication that may help address access challenges for women, language minorities or people with certain disabilities, for instance.

See Figure 3 for a map showing the range of CCE activities identified in this study.

Sharing information
Typical information-sharing mechanisms in humanitarian responses can either be face-to-face, via community outreach volunteers and information hubs, or technological, such as radio
Figure 3: Map showing range of communication and community engagement activities

Note: this list is not comprehensive, and the line between individual and collective approaches is often blurry. This graphic is not a comment on how effective each activity is in each location, but hopefully it provides an overview of activities undertaken globally.
broadcasts, SMS and social media. Regardless of the medium used, however, the development and use of key messages in formats that can be well received and understood is necessary to ensure coherent and coordinated information provided to communities (CDAC Network, 2019). A collective approach can, on the one hand, help ensure agreed-upon messages are used, for instance via message banks as in the Ebola response in the DRC and the mixed migration response in Venezuela. Conversely, it can result in messages that are not properly contextualised by region or language, delays in getting messages validated and, in the case of Ebola and more recently Covid-19, messaging that does not keep up with the fast pace of the outbreak (Dewulf et al., 2020; Translators without Borders, 2020). With sudden-onset emergencies, agreeing on roles and responsibilities, as well as the process of validation, for messaging during the preparedness phase can greatly reduce these risks.

Face-to-face engagement is an almost universal preference in humanitarian responses; yet it is hard to do it well and at scale (Mosel and Holloway, 2019). In many responses, however, it is essential (if human-resource intensive) and a collective approach can ease this burden. In Nepal, for example, information was delivered to hard-to-access communities through partnerships with the Nepal Scouts, Trekking Agencies Association of Nepal and the Nepal Mountaineering Association (Nepal Common Feedback Programme, n.d.).

More technological avenues for communicating, while not as personal as face-to-face engagement, can help get information to large numbers of people across multiple geographies without being restricted by human resources. Of these, the most common is radio programming, so much so that telecommunications companies and service providers are often seen as a vital and intrinsic part of CCE working groups, particularly following natural hazard-related disasters (see, for example, Routley, 2018). In a protracted crisis like CAR, some people prefer receiving information via radio programmes, though coverage has been hampered by conflict and access is gendered, with more men than women able to listen (Barbelet, 2020).

Collecting feedback
Similarly, the second type of activity – collecting feedback – can be done either face-to-face or through technology and can be either proactive or passive. While human contact is resource-intensive, community outreach volunteers can often play a dual role in both communicating information and collecting feedback. Perception surveys are also often undertaken in person and it is important that they are done as a common service agreed through a collective approach to avoid survey fatigue. As proactive feedback where organisations and agencies ask questions of a robust or representative sample of aid recipients and systematically collect feedback to inform the humanitarian response, perception surveys tend to be more representative of affected communities and less problematic than collating only passive feedback. However, feedback received passively by humanitarian responders allows affected people to engage proactively without being constrained by a process or specific survey questions. Both avenues add value in informing the response.

Not everyone prefers to give feedback in person, however, and anonymous ways to lodge complaints are important for accountability. Collective approaches have often relied on common-service hotlines and call centres as a more comfortable method for affected populations to use, as in Iraq, Afghanistan and Mozambique. But these should not be seen as the ultimate goal of a collective approach since they can be inaccessible and are not usually preferred by women or people with certain disabilities. In Iraq and Afghanistan, for example, most mobile phone owners are men. As such, in 2018, only 32% of the callers to the Iraq IIC – and 20%
of callers to a similar call centre in Afghanistan were women (Lancaster, 2019). Similarly, in Mozambique, only 22% of callers to Linha Verde were women (Lough et al., 2020).

Once feedback is collected, it should be analysed collectively in order to identify trends across multiple sectors or agencies and organisations. This step, however, has often been overlooked or ignored due to its being technically difficult, labour-intensive and statistically unreliable. In Indonesia, for instance, one of the limiting factors to the collective approach was that the abundance of data collected was not used systematically to improve the response because the emphasis remained on collecting and verifying micro-level data, such as names, addresses and severity of damage, rather than analysing it to identify trends (Holloway and Fan, 2020). Similarly in Mozambique, there was no specific space created for joint analysis of feedback at the strategic level, which resulted in the analysis and presentation of data from the hotline Linha Verde being led by World Food Programme (WFP) staff as a standalone process, limiting its ability to paint a more comprehensive picture of the overall response (Lough et al., 2020). By contrast, the collective approach to CAR includes eight dedicated perception indicators in the 2020 HRP, which ensures that the data collected will be analysed at the response level through multiple channels using a software system for collecting, collating, analysing and identifying trends (Barbelet, 2020). In the DRC Ebola response, the deployment of a social analysis cell and the Red Cross feedback mechanism also enabled systematic analysis of qualitative data and trend identification (Dewulf et al., 2020).

After being jointly analysed, information should then be passed on from the collective to the appropriate agencies to ensure the response is modified and adjusted based on collected feedback (CDAC Network, 2019). One way to present this information is in some form of bulletin that can be circulated among humanitarian actors, UN agencies and government officials, as in the Rohingya response in Bangladesh (Bailey et al., 2018). In the Central Sulawesi response, this step of collating information highlighted the abundance of concerns and complaints regarding collective temporary shelters, leading to a change in government policy and the option of individual temporary shelters (Holloway and Fan, 2020). Though difficult and labour-intensive, without this step, the collective approach risks collecting data for data’s sake, rather than using it to improve the response.

Closing the feedback loop

The final type of activity, and the one that is more often left undone or even ignored, is closing the feedback loop. To successfully do this, organisations or the working group in charge of a collective approach should not only acknowledge feedback, but also respond, clarify and explain why follow-up actions were (or were not) taken (Bonino et al., 2014; see also Ong et al., 2015). Where this has been done in previous and ongoing collective approaches, it has been most often through radio programming, like in Haiti and CAR, and printing and distributing frequently asked question (FAQ) sheets, as in Indonesia.

Without closing the feedback loop, trust between people affected by crisis and those responding to the crisis will be hard to maintain. The lack of investment in closing the feedback loop – and, indeed, in measuring and evaluating collective approaches – has also contributed to a lack of evidence on how feedback is used to inform decision-making and improve the quality of humanitarian responses.

RCCE activities

In public health crises, while information dissemination that focuses on behaviour change is critical, in certain contexts this has been prioritised over feedback and complaint components. In the 2014–2015 Ebola response in Sierra Leone, for example, the Social Mobilisation Action Consortium (SMAC) went beyond raising awareness via radio stations and religious leaders to community-led behaviour change via existing local community structures and face-to-face communication. SMAC’s work led to an increased sense of urgency and the development of community-led action plans (ACAPS, 2015b). In Liberia during the same outbreak, however, disconnected top-down health messaging proved to be largely ineffective, and better feedback mechanisms and two-way communication
were needed to understand and respond to the communities’ concerns (ACAPS, 2015a).

The case study on the 2018–2020 Ebola outbreak in the DRC undertaken for this project showed some progress in this area since the previous outbreak. Although there remained a focus on information for behaviour change, RCCE partners pushed for community feedback to be accepted, owned and acted upon by the response leadership. A community feedback workshop in Goma in July 2019 led to the institutionalisation of the Community Feedback Working Group, but this small development did not reflect an overall shift towards systematic consideration of feedback and use in decision-making. Instead, identical feedback was submitted week after week with no acknowledgement or adaptation of the response (Dewulf et al., 2020).

3.5.2 Information management and data protection

Efficient IM underpins successful collective approaches – or, as a UN worker stated, ‘Information is the backbone of AAP. You are either getting data from people or sharing data with people’. Another UN worker described having a dedicated project coordinator as ‘the Rolls Royce’ of CCE approaches but noted that ‘at the very least they need to exchange today on good practices through a Google Drive’.

This spectrum – from a simple shared folder to a more structured IM system – has been implemented in various collective approaches and has evolved with technological advances. These advances, such as Google Drive, WhatsApp and HDX, have eased the sharing of information, but, as noted in several inception interviews, have also raised questions around data privacy and how it is shared. As one Red Cross worker explained, in rapid-onset crises, it is often difficult to quickly agree on who will own and manage the data, but in conflict settings, how data is collected and who controls it can be particularly sensitive. In CAR, for example, concerns were raised around data protection and data-sharing with the Sugar CRM (customer relationship management) platform;13 however, it is too early to tell whether the platform will adequately address these concerns (Barbelet, 2020).

Data protection concerns, however, should not preclude agencies and organisations from being involved in collective approaches. As one UN worker noted:

> Agencies can have their own privacy policies and data sharing protocols, but every country I engage with their collective accountability framework and CCE has different components. You can have a collective approach that does not require the sharing of any data whatsoever. So UNHCR, for example, don’t have to share data if that’s a problem, but trends are important from each cluster, so come to the cluster meeting and share those trends that could still be used to feed into a collective approach.

3.6 Timeline of implementation

The timing of CCE activities being implemented depends on the type of response and the context of the crisis; setting up a collective approach takes time and all contexts will necessitate different priorities. In a natural hazard-related disaster, the first priority when setting up a collective approach is often how to provide information, whereas in a more protracted crisis that does not yet have a collective approach, a common feedback service may initially be prioritised as it would likely have the largest impact on the response. Based on the case studies, however, the timeline of implementation does not always follow logically. For example, in CAR, a protracted crisis with a longstanding humanitarian presence, the plans for a collective approach have been in motion for years and implementation has been greatly delayed in part to enable the best possible collective approach (Barbelet, 2020). With the architecture in place, it may instead have

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13 Sugar CRM is a proprietary private-sector CRM platform. For more, see www.sugarrm.com.
been more sensible to build on what was already there and then expand to other common services to get things moving more quickly.

Two key moments of a collective approach are typically overlooked: the preparedness phase and the transition phase. Although integrating collective approaches to CCE into preparedness has been advocated for several years (see Austin, 2017; CCEI, 2018), the desk reviews and case studies showed little investment in collective approaches during the preparedness phase, which only exacerbates the amount of time needed to set them up when a crisis occurs (see sections 4.6 and 4.7 for further details). To date, this has only happened in a few areas in Southeast Asia and the Pacific, namely Bangladesh, the Philippines, Fiji and Vanuatu, though to great effect.

How a collective approach transitions out of the emergency phase is also a key concern. In Mozambique, for example, WFP commissioned a sustainability study to explore the continued viability of the Linha Verde hotline as the response was reoriented towards development (Lough et al., 2020). According to a UN worker, for Mozambique, a ‘good enough’ collective approach ‘would be a structure that leaves something behind for the future’. In some countries, such as Nepal and, more recently, Indonesia, the collective approach has been integrated into the RC and government, respectively. In these contexts, understanding how to scale down, but not end completely, is vital for a quick scale-up for any future disasters.

### 3.7 Scale of cost and source of funding

One cause of the lack of systematic good CCE practice in humanitarian responses is that it is chronically under-resourced. While some donors are willing to fund collective approaches, the predictability and durability of funding remains challenging. There is a need for flexible and consistent funding for CCE initiatives (Austin, 2017; CDAC Network, 2019). Indeed, as one service provider noted, ‘Communicating [with communities] is still considered a pilot idea that needs to be tried out … but you can’t prove impact or proof of concept when it’s not up to scale’.

Funding was listed as a limiting factor in four of the five in-depth case studies. In CAR, for example, funding had three challenges: no multi-year funding, lack of guidance on funding individual versus collective approaches and reliance on traditional funding mechanisms that may see the collective approach pulled towards the interests of the donors or the organisations involved (Barbelet, 2020). Additionally, funding for CCE – both individual and collective approaches – is not systematically prioritised within individual organisations, including UN agencies. In Yemen, the lack of funding in the overall response – the most expensive humanitarian operation in history – has contributed to the lack of CCE as well as to distrust in the CCE mechanisms in place (El Taraboulsi-McCarthy, 2020). In the DRC, it reportedly took more than six months to secure funding for a dedicated RCCE coordinator (Dewulf et al., 2020). In Mozambique, though funding was initially easy to secure and continued to be secured for the Linha Verde hotline, it was more difficult to access for the CEWG, which was only funded for the first two months of the response (Lough et al., 2020).

Yet, collective approaches are comparatively cheap, representing only a tiny fraction of total humanitarian expenditure. For both Dominica and Mozambique, estimated direct funding to the collective approaches comprised less than 1% of humanitarian funds allocated to these countries in 2018 and 2019 respectively. For CAR, the budget for the 2020 collective approach amounts to 0.6% of the country’s total non-Covid-19 HRP requirement. Even in the Bangladesh Rohingya response, where the

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14 The authors recognise that the humanitarian sector has struggled more widely with preparedness, which in turn affects the ability of the sector to effectively integrate collective approaches to CCE in preparedness.

15 Though this was reported in the case study at time of publication, there have been donors willing to fund collective CCE activities in Yemen, but it has not happened due to lack of buy-in and delays on the part of the operational agencies involved.
2020 CwC sector funding requirements include both common services and cross-cutting agency level CCE, the sector’s budget again only amount to 1.1% of total requirements under the Joint Response Plan. These figures are especially striking when compared with the amount of money spent on humanitarian monitoring and evaluation – which leading donors recommend comprise 1–5% of programme budgets (DFID, 2019; USAID, 2019) – despite evidence that it serves primarily as a tool for internal or donor reporting (Warner, 2017).

However, for their size, collective approaches can also involve a disproportionately large number of actors and moving parts, making funding complex. Yet, the modality and configuration of funding can determine how quickly an approach can be deployed, how effectively it can secure buy-in, how inclusive it is and how far it supports collective action. Different funding approaches have varying strengths and weaknesses and there is no perfect mechanism best placed to support them (these issues are examined in more detail in Lough and Spencer, 2020).

To date, funding for collective approaches has tended to flow predominantly via either bilateral grants to implementing actors, or through UN agencies to subgrantees. Bilateral funding can provide stability and support activities functioning at scale, but does little to strengthen collective action and is often slow to process. Funding via UN intermediaries can strengthen collective approaches by ensuring they are well-linked to response-level decision-making; UN agencies are also generally well-positioned to bring in funding from a variety of sources and fill gaps through non-earmarked funding. However, their intermediary role may also foster top-down, hierarchical ways of working and erode perceptions of neutrality – and thus wider buy-in – in cases where agencies also have operational mandates. As one service delivery respondent for the cost analysis explained, ‘It’s hard for big agencies … to actually be collaborative, to distance themselves from their own mandate, to set up systems that aren’t “controlled”, in which everything that goes through has to be signed off and vetted by the agency rather than the collective’.

Global and country-level pooled funds offer a number of potential benefits for collective approaches (Lough and Spencer, 2020). They are particularly useful options for burden-sharing between donors, offering ways to expand the current limited donor base for collective approaches, as well as reducing the gaps, duplication and biases that can emerge from more fragmented funding models. In fast-onset emergencies, global pooled funding mechanisms such as OCHA’s Central Emergency Response Fund (CERF) and the nascent Humanitarian to Humanitarian (H2H) Network can be vital in getting services set up quickly, with both being used to this effect in Mozambique (Lough et al., 2020). However, they also function on short timelines and do little to support strengthening and deepening of approaches.

Country-based pooled funds (CBPFs) were widely considered to provide strong legitimacy to a collective approach by embedding funding within response-wide prioritisation processes. They were perceived as more likely to support neutrality and foster collaborative ways of working compared to UN intermediaries. Their strategic commitment to supporting local humanitarian action was also seen as a rare opportunity to ensure local actors involved in collectives could access higher-quality funding. However, funding through CBPFs requires a strong pre-existing commitment to collective CCE within a response, and still functions according to relatively tight timelines. In CAR for example, CBPF support was seen as inflexible and slow to disburse (Barbelet, 2020). Overall, while pooled funding mechanisms are perceived positively, they have been comparatively under-used in supporting collective approaches to date: out of 20 contexts with some form of collective approach in place analysed for the cost analysis study, CERF had been used in three, H2H in three and CBPF in five (Lough and Spencer, 2020).
Collective approaches to CCE will take various forms, will be inconsistently named and will be led by a number of organisations working within differing contexts and different types of response systems. Moving forward on collective approaches to CCE has for too long been hampered by debates on terminology and competition. The evidence outlined above demonstrates the many pros and cons of different models of collective approaches to CCE. This evidence also suggests that continued lack of understanding of what a collective approach entails and what CCE or collective accountability means has become a real barrier to moving forward (see Box 1). While no current response yet exemplifies all of the principles described in this chapter, such principles are sufficiently evident in a number of responses to suggest that progress towards them is within reach.

Another critical question arising in this study is around roles and responsibilities for the collective approach to CCE. The responsibility for designing, implementing and committing to a collective approach to CCE lies with the response leadership – whether that is the government or national infrastructure, a group of local and national actors (NGOs and CSOs), an HCT, a hybrid UNCHR–IOM leadership or a hybrid government–WHO leadership. Responsibility lies with those with the power to make decisions about funding and the strategic direction of a humanitarian response. When the collective approach to CCE is facilitated through a working group supported by a coordinator, the working group members and coordinator are facilitators. The implementation of the approach should be facilitated by whoever is best placed in that environment to do so, which commonly is a local organisation and, in non-conflict contexts, a local government.

This section outlines seven principles of an effective approach to CCE. The final round of interviews for this project confirmed that there is no such thing as a perfect model but instead, as a donor stated, what is needed are ‘a set of operating principles which we all agree are positive and how they apply to a specific context’. These principles are adaptable to different contexts, crises and response systems. While there may be appetite to, and value in, further developing these through designing five or six predictable models based on the type and scale of crises, the context and the response systems in place, such tools may limit the ability of the response leadership to design a system that is truly fit for purpose and to use the design process to get buy-in. There is currently disagreement in the sector over this; some actors are promoting the development of standard operating procedures to ensure more predictable and systematic collective approaches to CCE, in order to address current ad hoc practices around collective approaches. However, evidence from this research highlights that ad hoc practices
and lack of understanding undermine more predictable and systematic collective approaches to CCE. Too many elements differ from context to context that must inform the design of the collective approach to CCE – most importantly, the preferences of people affected by crisis in terms of two-way communication channels. Instead, predictability and moving away from ad hoc practices should be addressed through investing in disseminating information to and sensitising HCs and HCT members. This would encourage them to increase their awareness of existing commitments, share lessons from practice and evidence included in this report (including the pros and cons of different models – see Figure 2) and disseminate the principles outlined below. Our analysis points to achieving predictability through actualising existing commitments and bringing on board other key actors (governments, RCs, the disaster risk reduction community).

4.1 Leadership commits to early and ongoing collective accountability

This first principle is the most critical and the most challenging. Collective approaches to CCE have lacked commitment from the top. Buy-in from the response leadership is critical to make the link between feedback and decision making. However, getting buy-in from the leadership of humanitarian responses – whether that is national governments, local and national organisations, UN agencies and other internationals or HCTs – and securing the commitment from the top is the biggest barrier to moving forward. To secure high-level buy-in, the added value of collective approaches to CCE must be demonstrated, though to date it has been difficult to obtain this type of evidence due to a lack of implementation of such approaches.

A collective approach to CCE in its most essential form does not necessarily require an architecture (globally, nationally or at the subnational level) or extensive additional resources. It needs commitment from those in the response leadership to collective accountability – that is, commitment to fund mechanisms for two-way communication, to listen to the feedback and to act on it. As outlined above, clarity on language is required to support more commitment from the top alongside systematic and strategic engagement by CCE actors with their organisation’s leadership and response leaderships more widely, including governments.

Where possible (i.e. in non-conflict contexts), the collective should be facilitated by the government and national NGOs as part of a preparedness plan and integrated into the national architecture. Leadership differs in different types of crises and contexts: it can be a UNHCR-led response in a displacement setting or a hybrid response as seen in Bangladesh (UNHCR and IOM); or it can be an HCT led by an HC, which includes commitment from heads of agencies. Here donors should use their policies and power (especially around funding) to ensure commitment from the top.

A collective approach to CCE should be simple, functional and quick to adapt. As one
interviewee argued, there is a widely held view that a collective approach to CCE will ‘add all these meetings, it will slow down … response’, adding ‘you have to address that and say it needs not be complicated. A lot of it is around facilitation. Make it practical and simple’. Another said: ‘A good enough approach is ... relevant to an industry that has more needs than resources’, highlighting that ‘perfection is our enemy, we need to act fast’. Being practical would allow some action to be taken to ensure all actors are taking account, giving account and holding themselves to account. This can be seen as what one interviewee referred to as ‘building blocks’. Figure 4 outlines this minimal, practical approach, which would require some coordination support to work collectively.

Focusing on the minimal is critical to enable the collective approach to be in place in a timely manner. Indeed, the study found that collective approaches to CCE have often taken too long to set up. A UN worker noted that by the time collective approaches are underway, many organisations and agencies have already put their own CCE in place and do not want their normal modus operandum to be disrupted. To overcome this, he noted, ‘we need to develop a fast track way to have the collective approach operational from the onset of an emergency’.

In CAR, for example, Barbelet (2020) considers the amount of time needed to design and implement the collective approach to CCE as the first and main challenge. Though the HCT committed to a collective approach to accountability in 2017 as a compulsory element of their terms of reference, by the time of the fieldwork in late 2019, it was still not fully operational due to delays in appointing a coordinator. Similarly, in Mozambique, Lough et al. (2020: 24) note that the timeline of the collective approach did not always align with the timeline of the response. It took more than two months to set up Linha Verde, even with immediate access to funding and past hotline experience, due to a delay in securing government sign-off.
Despite commitment to a collective approach to AAP already being established as mandatory through the terms of reference for HCTs (IASC, 2017), the commitment of individual HCs or members of HCTs – including heads of agencies – is not always apparent. Their understanding of collective approaches to CCE also seems unequal, according to interviews for this study.

Existing guidance and tools available to HCs and HCTs are listed in Box 2, and there are a range of service providers and specialised organisations at the global level, such as REACH, Ground Truth Solutions, Internews and BBC Media Action, with many more at the national and local levels.

Where the response leadership is government-led or locally led, approaches such as the one in Indonesia where international and local actors work together to establish a system and advocate to the government has worked well (Holloway and Fan, 2020). Similarly, a CCE regional learning event in Panama in November 2018 stressed that:

Coordination is not optional, it is essential. However, while there are always calls for greater coordination, few organisations are willing to fully concede their power and work in collaboration and cooperation with others. The time for institutional flag-waving needs to end. Putting people at the centre requires aid organisations to look for coordinated and collective approaches to address needs, not work in isolation (Taminga and Nuñez, 2018: 49).

In many places, the success of the collective approach comes down to the willingness of actors to work together in collaborative spirit. Yet, as one interviewee pointed out, though it is a ‘collective’ approach, ‘it is ironic that we are not being collaborative in our approach’. When it comes to obtaining donor funds or taking responsibility for common services, interviewees said, the competition and risk aversion of individual agencies and organisations often outweigh the perceived benefits of collective

![Box 2: Commitments, guidance and tools available to support response leadership](image)

- HCTs Terms of Reference (IASC, 2017)
- Peer 2 Peer Support Note on collective accountability to affected people (Peer 2 Peer Support, 2017)
- Menu of AAP-related questions for multi-sector needs assessments (IASC et al., 2018)
- CDAC’s national platform approach and tools and guidance for nationally led collective approach to CCE for response and preparedness (see CDAC Network, 2019)
- IASC accountability and inclusion resources portal, hosted by ALNAP (IASC, 2020)
approaches to CCE. Where this collaborative spirit has flourished, however, the collective approach has had significantly more success.

Collective approaches to CCE should, as one interviewee highlighted, ‘have the agility to work with existing coordination structures’. Where actors have created new – and often parallel (see Dewulf et al., 2020) – coordination structures for the collective approach to CCE, it has hampered rather than supported collective CCE. One interviewee referred to past practices too often being ‘a helicopter approach’ – an approach that is lifted from somewhere else and dropped in – often unfit for the existing coordination and response practices.

To be effective, integration into a coordination model should ensure two elements. First, the manner in which a collective approach to CCE is integrated should safeguard the cross-sectoral nature of accountability. Second, integration in the coordination model should maximise the collective approach’s influence both on the leadership and those operating in the response. This can result from a commitment to accountability for the response leadership but could be further facilitated by having processes that enable coordination, information-sharing and collective decision-making based on feedback from affected people, as argued by a number of respondents for this study (as one person stated, ‘the golden [and] key main ambition’). As one interviewee highlighted, ‘For this to work, it needs to be coupled with activities that help humanitarian actors (at all levels) to understand, unpack and act upon the data’. Another explained that a collective approach to CCE is ‘ultimately successful if we have evidence of how accountability mechanisms [and] community insights influenced decision-making, how it influenced the overall strategic direction of a response. Otherwise it is another process’. Currently there is little evidence of this happening, though this may be due to a lack of investment in it being recorded.

Beyond response coordination, the collective approach to CCE eventually needs to link to wider development, governance and disaster response strategies. This is currently a major gap in the case studies, particularly regarding sudden-onset natural hazard-related disasters in Indonesia and Mozambique, and public health crises in DRC. CDAC Network, through its national platform approach, is attempting to address this and is offering one possible model to do so (see Austin, 2017: 23 – recommendation 2). It calls for integration in coordination mechanisms that are outside of humanitarian responses and the cluster system.

4.3 Builds on and complements individual accountability mechanisms

Collective approaches to CCE do not replace individual CCE mechanisms; they build on and complement them. Where individual CCE mechanisms are already in place, a collective approach should seek to, at the very least, bring together what information is relevant for the response more widely. As one interviewee stated, ‘A collective service or collective approach should never replace what agencies are doing. We must make sure that the two process of collective accountability and agency accountability reinforce each other’.

Single-sectoral CCE mechanisms can also be expanded across multiple sectors, although they need to be perceived as neutral and cross-sectoral. For instance, in CAR, there are plans to expand the protection hotline to cover all humanitarian sectors and become a cross-sectoral, response-wide CCE mechanism in support of the overall collective approach (Barbelet, 2020). Conversely, in Mozambique, Linha Verde struggled to be perceived as neutral and cross-sectoral beyond WFP and its mandate on food security (see Lough et al., 2020).

A number of interviewees highlighted that the relationship between individual and collective approaches to CCE was not always clear and could be seen as ‘an additional layer for agencies who sometimes can’t easily see the added value’. Individual CCE mechanisms are critical to ensure an organisation’s intervention is implemented and communicated effectively and allows inputs and feedback from affected people. However, they are often not geared towards getting general feedback on the humanitarian
response or to address issues raised by populations that fall outside of the organisation’s project or mandate and therefore fail to capture the issues that concern affected people instead of serving their needs. For instance, if a nutrition-focused organisation receives feedback on protection issues, there may be little they can do, outside an often lengthy and complicated referral process. A collective approach to CCE allows collective cross-sectoral, cross-agency issues to be passed on to forums that can facilitate collective decisions and action.

4.4 Facilitated by individuals with leadership, coordination and technical skills

Leadership is key to convening and ensuring engagement at the right level, while coordination skills are essential in order to facilitate the collective nature of the approach. Certain technical skills regarding communication, community engagement and IM are required to guide the approach effectively. Not having the right capacity in place has been one of the many bottlenecks to effective collective approaches to CCE.

Maintaining the collective nature of an approach also demands neutrality and independence. As one service provider reflected: ‘Now it is about agencies having to give up a lot of power. They have to give up their brand. That is one of the biggest issues. Collectives demand agencies giving up a lot of power’.

Staff delegated to the collective approach have a reporting line to the leadership response rather than their organisations and act independently, similar to the set up with cluster coordinators. This becomes difficult when funding is channelled through a specific organisation, however. Funding can equate to power and can take away the neutrality of those supporting the collective approach to CCE. As one interviewee argued:

This is difficult because this is where politics come in: who gets to lead, how are resources allocated. We need to be realistic that this is an opportunity not just to support the

response but also access resources … The challenge of why should a UN agency or a CSO be in the lead is an issue, but ideally, whoever is better positioned to actually lead this component in a different setting, partners should be able to decide this on the basis of very clear criteria (capacity on the ground, mandate on the specific focus of the emergency, length of presence on the ground). These criteria need to be well-defined.

Neutrality and independence are made easier where several agencies are willing to contribute money for a neutral coordinator, as is now the case in Myanmar (Husni, 2020). While hosting such a coordinator in a non-implementing organisation could aid neutrality, this study found instances where coordinators from implementing organisations were perceived as neutral.

4.5 Supported by buy-in from key stakeholders in the response

Beyond the response leadership, collective approaches to CCE require response-wide buy-in. Where buy-in has happened, collective approaches have succeeded. Lancaster (2019) considers the buy-in of senior leadership, such as the HCT, High Commissioner for UNHCR and country heads of donors, crucial to the success of the Iraq IIC, and Russel (2019: 14) notes that securing ‘buy-in from even those most reluctant to change’ was the main factor leading to the long-term success of the Common Feedback Project in Nepal. Unfortunately, a lack of buy-in has limited the effectiveness of many collective approaches.

In Nepal, the Common Feedback Project had the buy-in of the RC and HC, but high staff turnover which was not accompanied by ongoing trainings and workshops limited the buy-in of agency staff (Nepal Common Feedback Programme, n.d.). A collective approach can lose momentum if a good coordinator or group of people leave the response, as momentum is often carried by individuals rather than institutions. In Bangladesh, for example, the effectiveness of
Shongjog has been ‘largely credited to individual champions among Shongjog’s members, rather than to organisational buy-in or to co-ordinated action among members’ (Baksi, 2017: 3). This lack of buy-in at the ground level can lead to a self-perpetuating cycle: many field-level staff will not emphasise CCE unless it is led by the HCs, and according to a service provider, ‘HCs will not pay attention unless it is systematised. At the moment, it’s still too personality-led as to whether they take it seriously’.

Dedicated funding is a critical way to measure buy-in. As one interviewee described:

At global level, [success] … would be the production of an AAP framework16 agreed to by the IASC Principals, and then that everyone commits a certain amount of money and resources, because they all need to agree. So you can’t exclude the donors at this stage; this is why we have the Grand Bargain. So if everyone wants to be accountable, everyone needs to be on deck and commit to it with money. Success would be a set of objectives that are adequately resourced with concrete results that achieve accountability to affected populations.

Buy-in has been a challenge partly because of perceptions that large agencies have themselves not implemented global commitments on accountability. As one interviewee argued, the ‘biggest failing is within the individual agencies themselves and their failure to their own commitments on CCE and AAP’, commenting that without such commitment at the agency level, it is impossible to get buy-in from those at the response level.

Buy-in also needs to go beyond traditional humanitarian actors. When a large-scale humanitarian response arrives in a country, as happened in 2010 in Haiti, in 2017 in Bangladesh and in 2019 in Mozambique, it should pay special attention to whether it is shutting out the government (though this may reflect an unwillingness of government to engage and require advocacy and capacity support) or other national and local actors from collective approaches. Collective approaches to CCE will be stronger with the buy-in of all key stakeholders, particularly governments and other local actors. This is critical not only to ensure that the collective approach to CCE is informed by local voices and fit for the context, but also that it recognises what already exists or starts building towards localised accountability frameworks. Buy-in to collective approaches to CCE should not wait for a crisis to happen. It should be part of engagement with NDMAs as well as other line ministries (for example, the Ministry of Health as the main lead in a public health crisis).

4.6 Facilitates local leadership, engagement and capacity

Local actors have a unique role in engaging their own communities (CHS Alliance, 2018). Yet, despite Grand Bargain localisation commitments and the ‘new way of working’,17 local actors and government are rarely ever considered in the design of collective approaches, nor is local leadership considered as a way forward. This is because too often collective approaches to CCE are led by international actors. For example, in the Venezuela response, local grassroots organisations led the coordination structure on the ground. Yet, when new international organisations arrived, according to one UN worker, they ‘failed to understand the existing local capacity and responded as if … there was no local capacity’.

The capacities of local actors and (where relevant) government actors, including their

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16 The IASC Results Group 2 on accountability and inclusion is developing a collective accountability and inclusion framework that will set out the core commitments and building blocks for HCs and HCTs to guide joined-up efforts on information-sharing and community feedback and adapt responses accordingly.

17 For more on the new way of working, see www.un.org/jsc/content/new-way-working.
leadership capacities, too often do not contribute as they could to collective approaches to CCE. For example, the failure to identify and train local counterparts to support the collective approach to CCE, led by CDAC, following Hurricane Maria in Dominica was seen as a missed opportunity both to engage with the localisation commitment and to create a more sustainable response (Routley, 2018).

A collective approach to CCE needs effective participation of local actors, local leadership and, where appropriate, government leadership, as well as an investment in supporting local capacities and strengthening local systems. This is particularly crucial in contexts of protracted crisis and those prone to repeated crises. For example, this study found evidence of high turnover of international surge staff collaborating around CCE, lengthy set-up times where there was no pre-existing collective approach and questions around the sustainability of collective approaches to CCE after a crisis has ended, all of which negatively impacted on effectiveness.

However, participation and leadership of local CSOs is not always facilitated by the current international humanitarian architecture. When a collective approach to CCE is led by a UN agency, several barriers can hamper CSO participation. Language, for example, is often cited as a barrier to local CSOs’ participation in internationally formed coordination structures. As one interviewee highlighted, so is the location of coordination in ‘UN compounds where you have IDs’, further stating: ‘I hope we never see that again. That is a structure that fails to live and breathe what the mechanism should look like.’ The complex power dynamics between local and international actors also need to be addressed to support true collective approaches that fully embrace the role of local actors. Otherwise these dynamics can lead to a flawed localisation, as seen in Yemen (El Taraboulsi-McCarthy et al., 2020).

Proactive support to local CSOs to ensure they have the resources to participate and engage in collective approaches to CCE is critical. In Indonesia, arguably the most locally led response included as an in-depth case study in this project, local actors were noticeably absent from the CEWG meetings because they either did not see its relevance or did not have the necessary human resources to attend all the coordination meetings (Holloway and Fan, 2020). A localised approach also requires service providers such as REACH, Ground Truth Solutions, Internews, BBC Media Action and others to invest in supporting local service providers. Ground Truth Solutions trained local partners in feedback methodology following the Nepal earthquake in 2015 (Inter-Agency Common Feedback Project Nepal, 2015). Internews have invested in local organisations in CAR over the last few years, which has facilitated their involvement in the working group that supports the collective approach to AAP (Barbelet, 2020).

Additionally, a collective approach to CCE should consider the investment it needs to make in local capacity and local response systems, in particular government systems, to ensure its work continues beyond the life of formal – often internationally led – humanitarian responses. It should aim to become embedded in local systems that can be deployed in future crises. This is particularly relevant in contexts with a high frequency of natural hazard-related disasters; in many of these settings, such as Fiji, Vanuatu and recently Indonesia, governments have become the main drivers of the collective approach to CCE. This should be supported and implemented in all countries where possible.

Equally, advocacy and engagement with government or local authorities in conflict settings should be part of investment in local structures and systems. Investing in this entails engaging with national and local preparedness plans and the development counterparts that support government – in particular RCs and members of UN Country Teams. Engagement with local CSOs and local media will also be key in holding government and local authorities to account as well as identifying their roles in government preparedness plans (see Austin, 2017: 24 – recommendation 8). As one interviewee argued:

The role of local media – if we talk about accountability and CCE, that’s what local media does, and they are completely left out of the equation. I work with local organisations around the world in limited
capacity. They are doing amazing jobs and have trust of local people. If we want to make sure civil society is healthy and healthier than when we arrived, we need to work with local media to help them play their role; if we’re going to ignore or buy time to push messaging over local radios, then it doesn’t work. We need to encourage staff to engage with local media so the messages come from them, not us. They explain to host population what humanitarians are up to and what’s happening inside the tents so maybe people don’t destroy Ebola tents because they understand. These are low-cost initiatives, and I have never found a local radio station that didn’t want to do it.

4.7 Adopts contextually relevant, inclusive and effective CCE practices

The principles above relate mostly to the collective nature of the approach. However, a collective approach to CCE could adhere to all of these and yet still fail if its approach to CCE is flawed or unfit for the context. Therefore, a critical principle of an effective collective approach to CCE is to ensure it is built on effective CCE practices informed from the ground. This includes traditional assessments employed in many responses on the communication and feedback mechanism preferences of the affected populations. As one interviewee explained: ‘How you decide which [CCE mechanism]? Simple, you ask the communities. You ask how they want to feed back, how to complain, how to complain about the specific issues, how they want to receive information. You ask the communities. And design based on that and capacities’.

A grounded approach to designing collective CCE mechanisms should also include understanding local dynamics and the political economy of the humanitarian response (see Box 3). In Yemen, community-level dynamics around aid were not effectively integrated into the design of the collective approach, and accountability, community engagement and communication with communities were greatly affected by relationships between communities, local authorities, local actors and international actors, particularly where trust was an issue (El Taraboulsi-McCarthy et al., 2020).

Inclusion of specific groups such as older people or people with disabilities is critical for an effective collective approach to CCE. As one respondent argued: ‘If you are not including the vulnerable, you might as well not call it community engagement’. Those that are most often marginalised in societies are also most vulnerable to the impact of humanitarian crises and more commonly excluded from the services and assistance delivered by humanitarian actors. These individuals are usually the least able to participate in general needs assessments or surveys and often cannot use generic feedback mechanisms or access life-saving information. As one service provider reflected:

**Box 3: The importance of political economy analysis in CCE**

There has been little attempt to understand local power dynamics in humanitarian responses, as it is often seen as political against the principle of neutrality. As a UN worker said, ‘We do not do stakeholder mapping well. If we did this well, we would understand what the power dynamics are and who is trusted in the community’. Similarly, a donor noted, ‘There has to be an understanding of the diversity of communities and the power structures of communities to ensure that feedback is representative … The best collective approach will include both groups in as balanced and fair way as possible’. In Yemen, ignoring conflict and power dynamics resulted in a ‘false localisation’, where local leaders and authorities are seen as representative of local populations, without acknowledging their biases, leading to further exclusion of already marginalised groups. The collective approach to CCE has yet to figure out how to incorporate conflict sensitivity and political economy in the response.

Source: El Taraboulsi-McCarthy et al. (2020)
Avoiding duplication is the least of our worries. We need diversity more than we need to avoid duplication. The more the merrier. [If not] we will never be able to have a dense footprint in a community with people with disabilities, older people, the LGBTQI [lesbian, gay, bisexual, transgender, questioning, intersex] community … The diversity and inclusion, that is really where we fall short.

According to an interviewee, recent reviews of Humanitarian Needs Overviews and HRPs revealed that, while progress has been made to include people with disabilities in needs assessments, there were ‘no considerations around complaints and feedback mechanisms and around participation’.

Not only must CCE be inclusive and informed by engagement with different people to understand their specific communication needs, it should also invest in ways to engage with individuals that are accessible and appropriate for a diversity of people. Age, disability status, ethnicity, language, sexual identity, gender and other characteristics should all be considered. Reaching diverse voices does not happen automatically and must be done consciously. As one interviewee reflected, we need to ask ourselves ‘why did we choose not to make our session participatory? … I do not see efforts for information to be received and understood by those most vulnerable’.

Collective approaches to CCE also have a unique opportunity to be inclusive as they bring together local diversity organisations (e.g. the local older people’s association): ‘When it is collective you are far more likely to pick up all these perspectives, [things are] more likely to get flagged if you have more of the diversity organisations. If you have diverse approaches, you are more likely to realise the gaps’. Indeed, the effective participation of such organisations will help identify where CCE is exclusive, inaccessible or unfit to meet the specific needs of particular groups of individuals in the community. Where national platforms for CCE have been set up, there has been a deliberate strategy to ensure that diversity organisations have a seat at the table to inform an inclusive collective approach to CCE according to interviews.

Moreover, collective approaches provide an opportunity to implement multiple channels of two-way communication. This increases the chance of having channels that are accessible or fit the specific communication needs of individuals. Individual agencies can struggle to fund multiple channels and revert to one approach, but collective approaches to CCE can push for funding that allows these multiple channels to be implemented or to support the expansion of existing mechanisms in order to ensure they feed into the collective approach.

The question of inclusive CCE also brings up the question of direct participation of individuals affected by crises. An INGO worker stated, ‘There’s something paradoxical about how affected people can have a greater voice when it’s the agencies still designing the response. We are leaving them out of the discussion completely’. In the real-time evaluation of IOM’s response to the Rohingya crisis, for example, Van Brabrant and Patel (2018: 2, emphasis theirs) state that ‘overall, there is a major participation deficit, that keeps the refugees disempowered beyond the restrictions imposed by the GoB [Government of Bangladesh]’.

While some interviewees reflected that direct participation is not an easy task, they also argued that it needs to start being facilitated in order to improve within five years. One interviewee pointed to progress being made, for instance, through the Global Compact on Refugees and the participation of refugees and refugee-led organisations.
Towards more systematic and collective communication and community engagement

An accountable humanitarian response is a more effective humanitarian response. This study, however, has found an implementation gap between policy and practice. Despite a strong body of guidance and policy papers on collective approaches to CCE (e.g. Austin, 2017; IASC, 2017; Peer 2 Peer Support, 2017; CDAC Network, 2019) and commitments at a global level, implementation was found to be sporadic. Operational humanitarian actors lack a clear and uniform understanding of what such approaches entailed. Nevertheless, collective approaches are generally perceived by humanitarian actors as adding value.

To address this implementation gap, humanitarian leaders must act urgently to ensure humanitarian responses are informed by the perceptions of affected people, are effective at communicating with and inform people affected by crises. It is also vital that they are accountable to affected people, especially where that demands changing the course of their response. Our study identified seven principles that make a collective approach to CCE effective:

1. Leadership commits to early and ongoing collective accountability.
2. Works with existing coordination structures and to allow cross-sectoral decision-making.
3. Builds on and complements individual accountability mechanisms.
4. Facilitated by individuals with leadership, coordination and technical skills.
5. Supported by buy-in from key stakeholders in the response.
6. Facilitates local leadership, engagement and capacity.
7. Adopts contextually relevant, inclusive and effective CCE practices.

When considering how to implement collective approaches to CCE, the main bottleneck is a lack of political will by humanitarian leadership to translate existing evidence into practice in a given humanitarian response. The accountability and CCE community should focus their efforts on addressing this lack of action through advocating and raising awareness. This needs to happen with HCs and HCT members, with governments and their NDMAs and with development partners, in particular RCs, to embed this work in UN Country Teams. Initiatives such as the workshop organised in December 2019 by Peer 2 Peer Support with a number of HCs and Deputy HCs to discuss collective accountability should be repeated and stepped up.

Covid-19 has renewed the sector’s attention to the critical role CCE plays in responding to crises (Lough and Holloway, 2020). However, as seen previously in DRC, coordination around RCCE must not occur separately from the humanitarian sector’s wider efforts towards collective accountability (Dewulf et al., 2020). The humanitarian sector is often a bridge between disaster response, humanitarian response and public health response, and should aim to consolidate lessons, processes and practice.

This study was not able to get evidence on whether a global-level structure would enable more predictable and systematic collective approaches to CCE. Evidence showed the need for active engagement and advocacy within the
Evidence also called for more available and dedicated capacity for coordinating and facilitating the implementation of collective approaches under the response leadership. With a lack of further evidence, opinions remain divided on what is needed at the global level. Some argue that the process should be mainstreamed into existing structures and response systems, while others think that a global structure similar to that of the global clusters would enable more predictable and systematic collective approaches to CCE. The CCEI, as a community of practice, made some progress before being incorporated into IASC Results Group 2, but it did not transform practice on collective approaches to CCE. What is clear is that investment and action must happen at the crisis-response level at this point to ensure implementation. A study specifically examining what global-level structure would be effective at supporting collective approaches at the crisis-response level could provide the evidence needed to create a consensus and critically explore different options. The recommendations below look at existing initiatives and their potential as avenues for global-level influence and change.

Moving towards more community-led responses to humanitarian crises where decision-making is in the hands of those affected will ultimately solve part of the challenge of accountability. Until community-led responses become more widespread and the norm, the below recommendations are steps that could further enable the move from rhetoric to practice. These recommendations should be considered alongside the principles of effective collective approaches to CCE outlined in the previous section, as well as existing recommendations in past studies (Austin, 2017; Peer-to-Peer Support, 2017; CDAC Network, 2019).

5.1 Recommendations

5.1.1 To AAP and CCE communities of practice

1. **Prioritise engagement with response leaders outside of the AAP and CCE community of practice.**
   - This means refocusing efforts away from internal technical discussions on the how and what of CCE to concentrate on ensuring that HCs, HCTs and other humanitarian response leaders understand their roles and responsibilities in setting up and supporting collective approaches to CCE.
   - At the global level, this could include for example a repeat of the 2019 December Peer 2 Peer Support workshop that brought HCs and Deputy HCs together, which could also include senior leaders of large humanitarian organisations and sensitize them to collective approaches to CCE, to increase awareness, understanding and buy-in for the principles outlined in this report. Such workshops would be more effective than designing new tools or guidance. The principles developed in this report and the matrix illustrating different models (see Figure 2) could form the basis for such workshops.

2. **Initiate a dialogue with government counterparts, development actors and other stakeholders on collective approaches to CCE.**
   - Sectors and actors to engage with should include RCs and the UN Country Teams they lead, NDMAs, key line ministries and, more widely, development and disaster risk reduction actors who support government to prepare for and respond to disasters. These actors should be supported to consider how to integrate collective approaches to CCE into their work so that, when a crisis strikes, they

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18 Lessons from the RCCE global service may provide further evidence of the usefulness of a global-level structure for putting in place collective approaches to CCE in crisis response.

19 For more on the focus of a global-level service to support collectives approaches to CCE, see Austin (2017: 21).
are able to trigger already established mechanisms and structures that are fit for the context.
- At the country level, this could take the form of AAP and CCE specialists presenting the concept of a collective approach to the NDMAs, UN Country Team and RC’s office.
- At the regional and global levels, this could take the form of convening a dialogue between key development and disaster risk reduction experts who engage regularly with NDMAs to raise awareness of the collective approach to CCE and help identify how it could be integrated in the work of such actors.

3. Work with other humanitarian reform processes and initiatives to join voices and push for change that would enable collective accountability.
- At the global level, this would include working with the Grand Bargain workstreams 2 (localisation), 6 (effective participation) and 7+8 (quality and flexible funding) and the IASC Results Group 2 on inclusive humanitarian action and accountability.
- This engagement could, for example, include reiterating commitments already made by the IASC in any decision document or policy documents, as well as language that commits humanitarian actors to supporting collective approaches to CCE.
- Lessons from the current initiative on RCCE as part of the global Covid-19 response must inform ongoing work in the humanitarian sector and be considered when deciding how best to join up collective efforts across humanitarian, disaster and public health responses.

4. Ensure that political economy and anthropological analyses inform the design of CCE mechanisms at both collective and individual agency level.
- Political economy, conflict sensitivity and anthropological analyses should help address how complex relationships between actors in a response and community-level dynamics affect the design and implementation of a CCE mechanism. This could include deploying national researchers such as anthropologists and introducing social science research cells as seen in the Ebola response in West Africa and eastern DRC.
- These approaches should be coupled with the preferences and cultural practices of affected people regarding communication channels, feedback mechanisms and communication needs.

5.1.2 To Humanitarian Coordinators, heads of agencies and INGOs and other actors in the formal international humanitarian system

1. Use the principles outlined in chapter 4 to put into action the commitments to collective AAP already made in the sector.
- At the crisis level, at a minimum this requires (1) mainstreaming accountability and CCE questions in multi-sector needs assessments and reflecting the findings in reports on needs (see IASC et al., 2018); (2) including perceptual indicators and targets linked to the strategic objectives in response plans; (3) making collective accountability a standing agenda in response leadership strategic meetings (e.g. HCT meetings); and (4) proactively collecting feedback regularly and acting upon that feedback promptly and meaningfully.
- For this to happen, individual organisations involved in humanitarian responses need to make commitments in practice through investing in their capacity to support collective approaches to CCE, including through establishing robust individual CCE mechanisms. Investment should be made at both the crisis level and the global level (i.e. dedicated headquarter capacities to support field offices).

2. Advocate for and prioritise funding through pooled funds to support collective approaches to CCE.
- Where CBPFs are in place, the HC should advocate for dedicating resources to support the collective approach to CCE,
particularly in mechanisms that collect feedback proactively and provide analysis to inform strategic decision-making.

3. Dedicate capacity, formal space and resources at the regional and global levels to support country-level implementation of collective approaches to CCE.
   – To support more systematic and predictable collective approaches to CCE in crisis response, dedicated capacity, formal space and resources at regional and/or global level are needed, although how best this should be structured remains unclear. A space already exists in the IASC Results Group 2, which aims to provide coordinated technical support to HCs and HCTs. Ensuring dedicated capacity is available to support more systematic and predictable collective approaches to CCE is critical, whether through an IASC system, cluster-like structure, an extension of the RCCE common service or surge capacity system.
   – However, the IASC Results Groups have a short lifespan and advocacy to the IASC will be needed to maintain a focus on collective accountability. The IASC Principals should continue to ensure there is dedicated capacity on accountability that supports country-level implementation through tailored advice based on evidence as well as the convening of response leaders to sensitise and raise awareness of existing evidence and commitments. This should also include supporting global-level service providers so they can advise response leadership.
   – Consider developing a global surge capacity roster. This surge capacity must consider the integration of local and regional capacities as well as capacities within international organisations. Dedicated capacity support could come through formalising and funding CDAC’s role to help bring together the currently fragmented CCE capacity. This surge capacity system must ensure the support is seconded to the response leadership (government NDMA, HC office, OCHA, RC office) to gain their buy-in and be influential.

4. Invest in real-time monitoring and evaluation, and systematic analysis on how feedback from affected populations is used to improve the effectiveness of the response.
   – While further evidence is not needed to inform how collective approaches to CCE should be implemented in crisis, there is a gap in monitoring and evaluating how far decision-making is based on feedback from affected populations. This recommendation links closely to the development of the IASC Results Group 2 Results Tracker at the global level.
   – This investment should also include closing the feedback loop by informing affected populations of what steps have been or are being taken to address the concerns identified.
   – Such a system for monitoring and evaluation should include an understanding of how changes in the response lead to better humanitarian access, acceptance by communities, security for responders and the population’s satisfaction with the assistance and services they receive. The methodology could be included in strategic operational reviews.

5.1.3 To donors

1. Commit to funding collective approaches to CCE with predictable and multi-year funding.
   – Fund fully developed collective approaches over time and stop funding CCE as pilot programmes.
   – Multi-year funding should be provided to collective approaches to avoid repeating expensive start-up costs and losing the trust of affected communities for the collective approach.
   – Support pooled funding mechanisms such as H2H and CBPFs in order to ensure responsive and collective action.
   – The costs of a collective approach generally represent 1% or less of HRP budgets. Consider earmarking between 0.5% and 1% of the overall humanitarian response budget to support a collective approach to CCE.
– Encourage partners to explicitly budget for agency-level CCE and set benchmarks for this.

2. Demand more collective action, including collective accountability indicators in strategic response plans and lobbying for accountability commitments from lead agencies.
   – Donors can use their position of relative power to influence response leadership and heads of agencies to put their commitments into action.
   – This would require donors to come together and coordinate their engagement based on consensus on what an effective collective approach looks like. Based on this study and other evidence, we would encourage donors to adopt the principles outlined in this report for what an effective collective approach to CCE looks like.
   – Raise awareness and advocate with HCTs and pooled funding boards on the role CBPFs and CERF can play in supporting collective approaches.

3. Support the effective participation and leadership of local actors in collective approaches to CCE through donor funding policies and engagement.
   – This would include ensuring that funding supports local actors so that collective approaches to CCE are built from the ground up, complementing rather than replacing existing work and capacity.
   – Funding should include provision for indirect costs recovery, such as administrative costs and systems, IM systems and human resources.
   – Funding should also be dedicated to strengthening the capacity of local organisations and systems to support participation.

4. Donors should consider how development funding can contribute to collective approaches to CCE.
   – This is particularly critical in contexts where humanitarian responses are led and coordinated by governments and in contexts where disasters are frequent.
   – Such funding should support the government to incorporate collective approaches to CCE in preparedness plans.
   – This includes providing additional funding to national disaster management structures in-country, so they have better capacity for CCE and thus to fulfil their own obligations to their citizens.


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