Protection and Accountability to the Affected Population Survey
Summary Report | June 2021

Introduction

The objective of the online survey was to inform the Food Security Sector (FSS) Action Plan to further mainstream Accountability to the Affected Population (AAP) and Protection in 2021, by measuring the capacity of partners and understand the needs and challenges of partners to address AAP and Protection issues adequately. The survey was developed in collaboration with WFP AAP and Protection focal point. It was shared with FSS partners, and it received 30 responses from 27 organizations between 7-20 June 2021.

Findings

Respondents by type of organization

Out of 30 respondents who completed anonymous this survey, 17 were from international NGOs (57%), 10 were national NGOs (33%), and 3 were UN agencies (10%).

Protection focal points within organizations

10 out of 14 (71%) international NGOs had a Protection focal point whereas 3 out of 10 national NGOs had a Protection focal point when the survey took place. 100% of UN agencies who completed the survey had a Protection focal point.

Complaints and Feedback Mechanisms (CFM) within organizations

9 out of 14 (64%) international NGOs had its CFM system whereas 6 out of 10 national NGOs had its CFM system when the survey took place. 100% of UN agencies had its own CFM system.
Communication channels used for CFM

Out of 21 respondents with CFM, Hotline was the most commonly used communication channel, used by 75% of INGO respondents, 100% of NNGO respondents and 100% of UN respondents, followed by use of staffed feedback box (83% of INGOs, 66% of NNGOs, and 33% of UN agencies), and helpdesk (66% of INGOs, 83% of NNGOs, and 33% of UN agencies).

21 respondents with CFM had on average 5 channels available for filing complaints and feedback to partners, with a maximum of 10 channels and a minimum of 1 channel.

Consultation with communities

Over 60% of respondents said they consulted communities during planning stages on information needs, language requirements, and preferred communication channels. 4% of respondents had not consulted communities during planning stages on both language requirements and preferred communication channels.
How communities were engaged or consulted about the CFM

Focus group discussion was the most common way of consultation used by all organizations (76% of INGOs, 70% of NNGOs, 100% of UN agencies), followed by key informant interviews (71% of INGOs, 40% of NNGOs, 33% of UN agencies), and survey (29% of INGOs, 10% of NNGOs, and 33% of UN agencies).

Who was engaged or consulted about the CFM

Out of responses from 21 respondents with a CFM, beneficiaries were most commonly consulted by all organizations (100% of INGOs, 100% of NNGOs, 100% of UN agencies), followed by volunteers (66% of INGOs, 100% of NNGOs, 100% of UN agencies) and with Majhis (58% of INGOs, 100% of NNGOs, and 33% of UN agencies). 57% of respondents (58% of INGOs, 50% of NNGOs, 66% of UN agencies) reported that they had consulted elderlies, and 62% of respondents (66% of INGOs, 50% of NNGOs, 66% of UN agencies) reported that they had consulted persons with disabilities about the CFM.
Application of outcomes of consultations

70% of respondents reported that outcomes of the consultations were used to redesign and implement their CFM, and 30% of respondents reported that they are partially used, showing the varying degrees of responses and adjustments to the CFMs based on the feedback received from consulted beneficiaries.

Sensitivity of CFM

78% of respondents that their organization’s CFM is equipped to receive and refer cases of a highly sensitive nature, including allegations of sexual exploitation, harassment, abuse and fraud.

Steps taken after a complaint or feedback

When asked what steps are routinely taken when a complaint or feedback is received, 92% of INGO respondents, 100% of NNGO respondents, and 100% of UN respondents reported that they routinely take action. Further, 83% of INGO respondents, 83% of NNGO respondents, 100% of UN respondents reported that they routinely refer cases to other actors, and 75% of INGOs, 100% of NNGOs, 33% of UN agencies) reported that they begin an investigation.

Types of referrals or issues shared via inter-agency CFM

The most common types of referrals or issues shared were protection-, fraud-, and misuse-related (53% of respondents), followed by GBV-related (50%) and food-related (50%). NFI-related and UNHCR/data amendment-related referrals or issues were the least common at 30% and 33% of responses respectively.
Types of referrals or issues received via inter-agency CFM

The most common types of referrals or issues received by FSS partners were GBV-related (40%) and food-related (40%) referrals or issues, followed by protection-, fraud-, misuse-related (33%).

Types of food-related referrals shared with FSS

Requests to modify food items were most commonly reported (26% of respondents), closely followed by not enough quantity of food (23%), poor quality of food (20%), and not receiving enough rice (17%). 6 respondents (20%) had shared referrals related to beneficiaries not receiving food and 3 organizations (10%) reported misbehaviour with beneficiaries.

Feedback after referrals

57% of respondents reported receiving resolution on the cases or closure of feedback loops referred to other organizations or Sectors., showing that within the inter-agency referral framework, there is a gap in response from receiving agencies to take action and close the loop on the feedback and complaints referred.

Participation in IOM managed inter-agency CFM

52% of respondents had not participated in IOM’s CFM system, 30% of the respondents were not aware of the system, and 17% of respondents had participated. The lack of response on feedback referred to other agencies can be attributed to the level of understanding of how the inter-agency CFM works. Further, low participation and lack of awareness of CFM explains lack of response or delays in closing the referred cases.
Data protection procedures

Out of 21 respondents with CFM system, 19 respondents (90%) reported that they limit access to data received through CFM, 18 respondents (86%) reported that they inform how personal data will be handled, and 15 respondents (71%) reported that they collect informed consent before. 1 respondent reported there are no measures in place.

Centralised CFM system

Out of 21 respondents with CFM system, 13 respondents (62%) reported that they have a centralised system for all communication channels, 6 respondents (29%) reported that they have a partially centralised system in place, and 4 respondents (19%) reported that their CFM system is not centralised.

Support needed for CFM and Protection mainstreaming

20 respondents (66%) reported that they would like to receive technical guidance on protection mainstreaming, 17 respondents (56%) reported that they would like to receive support to develop age and disability inclusive CFM system, and 12 respondents (40%) reported that they would like to receive support with mainstreaming Humanitarian Hands on Tool (HHoT).