Core Humanitarian Standard Assessment Tool

(09 March 2022)

Contents

I. Introduction to the Tool

The Core Humanitarian Standard (CHS) facilitates the improvement of the quality and effectiveness of humanitarian response by organizations and individuals to prevent and alleviate human suffering during emergencies. It has nine commitments. The CHS ensures that the communities and people affected by crisis can expect:

1. To receive assistance that is appropriate and relevant to their needs;
2. To have access to the humanitarian assistance they need at the right time;
3. That they are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action;
4. To know their rights and entitlements, have access to information and participate in decisions that affect them;
5. To have access to safe and responsive mechanisms to handle complaints;
6. To receive coordinated, complementary assistance;
7. Delivery of improved assistance as organizations learn from experience and reflection;
8. To receive the assistance they require from competent and well-managed staff and volunteers; and
9. That the organizations assisting them are managing resources effectively, efficiently and ethically.

It is in support of institutionalizing the CHS into local humanitarian organizations that the Core Humanitarian Standard Assessment Tool (CHSAT) was developed. The tool endeavors to assist in the self-evaluation of the status of the institutionalization of the CHS into organizations involved in humanitarian assistance for people affected by disasters. It is important to note that since the CHSAT is a self-assessment tool, its results are intended to be used primarily by local humanitarian organizations to identify gaps and help improve their own adherence to the CHS.

The CHSAT has several segments. The segment on institutional profile seeks organizational information. It is followed by nine segments, each segment representing one of the nine commitments of the CHS. Responses for these nine segments will be based on a five-point scale described in the tool. The first assessment serves to provide baseline information or status quo. Subsequent assessments in regular intervals (e.g., monthly, quarterly, semiannually, or annually) may be used to track improvements. The CHSAT may be locally adapted to suit the local context for better implementation of humanitarian interventions and CHS compliance. It may also be translated into local languages.

Organizations using the CHSAT for the first time may refer to the Guidance Notes for specific guidelines on how to use the tool and on measures to do after the self-assessment. Relevant information about CHS is also provided as annexes to this document.

The CHSAT was developed by the Asian Preparedness Partnership (APP), with secretariat support from the Asian Disaster Preparedness Center (ADPC) and under the aegis of the Bill and Melinda Gates Foundation (BMGF) and the USAID Bureau for Humanitarian Assistance (USAID BHA). More information about the APP may be found in Annex A.

II. Core Humanitarian Standard Assessment Tool (CHSAT)

Institutional Profile
Name of the organization: ……..………..
Type of organization: ○ Government   ○ Non-government organization   ○ Private sector   ○ Other, please specify: ……………………………………………………………………..……
Are you a legal entity under the Laws of your country? ○ Yes   ○ No   Please specify the nature of legal mandate …………………………………………….………………………………
Geographic area of operations: ○ National   ○ Provincial   ○ District   ○ City / Municipality   ○ Village
Number of employees / personnel: ……..……….
Disaster risk management (DRM) activities performed: ○ All phases of DRM   ○ Before disasters   ○ During disasters   ○ After disasters

General Instructions:

In each of the indicators in the table below, circle what is appropriate.

> *1 = No, not currently.*
> *2 = No, we are in the process of developing it.*
> *3 = Sometimes.*
> *4 = Yes, we are at the beginning stages.*
> *5 = Yes, always.*

If an indicator does not apply to your organization, circle N/A (not applicable). Indicators that generate N/A responses shall be taken out from the computation of scores.

The remarks column may be used to write the explanation for choosing a specific numerical answer. It may also be used to write recommendations for further action to improve on the specific indicator.

CHS 1. Understanding and meeting the community's needs.								Remarks
1.1	Your organization conducts situation analysis prior to project formulation (*to understand the multi-hazard risk context, social vulnerability, vulnerability of infrastructure and critical facilities, response needs, and capacities of at-risk communities and local government*).	N/A	1	2	3	4	5	

1.2	Your organization collects and collates disaggregated data relevant for the assessment using a team of volunteer community members trained to use a standardized template (*for sex, age, disability, health, lactation, pregnancy, education, social status, previous displacement, livelihoods, etc.*).	N/A	1	2	3	4	5	
1.3	Your organization identifies adequate shelter provisions for a potential number of displaced persons inclusive of all camp services (with proper communication to potential camp residents for awareness creation on contingency safety procedures for biological hazards).	N/A	1	2	3	4	5	
1.4	Your organization takes into consideration the protection needs of women, men, children, adolescents, elderly, persons with disabilities, and those in hard-to-reach locations.	N/A	1	2	3	4	5	
1.5	Your organization formulates time-bound interventions for identified needs including end-to-end early warning in an inclusive and participatory manner with the community.	N/A	1	2	3	4	5	
1.6	Your organization undertakes stakeholder mapping for implementation of identified interventions.	N/A	1	2	3	4	5	
1.7	Your organization implements formulated interventions in consultation with the community.	N/A	1	2	3	4	5	
1.8	Your organization has a standardized template for project formulation.	N/A	1	2	3	4	5	
1.9	Your organization has a dedicated and trained staff team for project formulation, coordination, implementation, and monitoring and evaluation.	N/A	1	2	3	4	5	
1.10	Your organization has a validated monitoring and evaluation strategy that is participatory in nature and allows adaption to changing needs, capacities, and context.	N/A	1	2	3	4	5	
1.11	Your organization shares formulated project information with beneficiaries and stakeholders.	N/A	1	2	3	4	5	
1.12	Your organization identifies strategies for adequate funding and creates accurate budgets for feasible interventions.	N/A	1	2	3	4	5	

CHS 2: Giving support when the community needs it.								Remarks
2.1	Your organization identifies obstacles and constraints for project implementation with stakeholders and partner organizations, and these are given due recognition in project planning.	N/A	1	2	3	4	5	
2.2	Your organization includes timeframes for delivery of services and monitoring systems in project plans.	N/A	1	2	3	4	5	
2.3	Your organization builds flexibility into project implementation to refine decisions based on new information and identified gaps.	N/A	1	2	3	4	5	
2.4	Your organization aligns project commitments within the scope of the organizational mandate for implementation with the support of partner organizations.	N/A	1	2	3	4	5	
2.5	Your organization undertakes optimal efforts for the adherence to the Sphere standards during shelter provision.	N/A	1	2	3	4	5	

2.6	Your organization reviews institutional policy for administration, human resources, and finance to ensure ongoing monitoring and evaluation of activities, and it uses evidence from monitoring and evaluations to adapt and improve projects enabling timely decision-making with adequate allocation of resources.	N/A	1	2	3	4	5	
2.7	Your organization uses early warning systems and contingency plans.	N/A	1	2	3	4	5	
2.8	Your organization uses monitoring results to adapt its programs.	N/A	1	2	3	4	5	

CHS 3: Providing support that helps communities recover and prepares them to respond to a similar emergency in the future. No harm shall be done to the communities.								**Remarks**
3.1	Your organization identifies and acts upon potential, actual, or unintended negative effects in the areas of people's safety, security, dignity and rights, sexual exploitation, and abuse by staff, and religious, culture, and gender bias as regards project planning.	N/A	1	2	3	4	5	
3.2	Your organization identifies and addresses needs and capacities of different groups who are exposed to different levels of risk.	N/A	1	2	3	4	5	
3.3	Your organization is involved in development of local leadership and capacity as first responders with appropriate representation of marginalized and disadvantaged groups.	N/A	1	2	3	4	5	
3.4	Your organization takes action in strengthening and diversifying community livelihoods to enable rapid recovery, with business continuity plans for business enterprises formulated and awareness created.	N/A	1	2	3	4	5	
3.5	Your organization promotes and implements interventions that are focused on early recovery.	N/A	1	2	3	4	5	
3.6	Your organization formulates an exit strategy at the commencement of the project to ensure longer-term positive effects and to reduce dependency.	N/A	1	2	3	4	5	
3.7	Your organization reviews institutional policies for administration, human resources, finance, and resource mobilization to allow mandatory screening of projects to comply with "do no harm".	N/A	1	2	3	4	5	

CHS 4: Informing the communities about the support they can expect and how they should be treated. We will do our best to give communities a say in decisions about the support provided.								**Remarks**
4.1	Your organization has established mechanisms to share accurate, timely, understandable, and accessible information and enhanced community participation to disseminate such information.	N/A	1	2	3	4	5	
4.2	Your organization has established mechanisms with beneficiaries for feedback, paying attention to the gender, age, and diversity of those giving feedback.	N/A	1	2	3	4	5	
4.3	Your organization reviews institutional policies for administration, human resources, finance,	N/A	1	2	3	4	5	

	and resource mobilization to ensure accurate information-sharing is done, promoting a culture of open communication.							

CHS 5: Ensuring that communities can report problems if they are unhappy with the support we provide or with the way our staff treat them. No one should harm an individual if they make a complaint. We will act in response to complaints.								**Remarks**
5.1	Your organization consults at-risk communities on the design, implementation, and monitoring of complaints-handling processes.	N/A	1	2	3	4	5	
5.2	Your organization has established mechanism to accept complaints, and awareness is carried out on how to access the mechanism.	N/A	1	2	3	4	5	
5.3	Your organization ensures the confidentiality and safety of the complainant and those affected.	N/A	1	2	3	4	5	
5.4	Your organization ensures resolution of complaints within a reasonable period in the context of emergency response and in consultation with partner organizations where relevant.	N/A	1	2	3	4	5	
5.5	Your organization ensures review of institutional policies on project implementation to enhance the process of complaints handling.	N/A	1	2	3	4	5	

CHS 6: Working together with other organizations that provide support. We try to combine our knowledge and resources to better meet the community's needs.								**Remarks**
6.1	Your organization ensures that all response activities planned are vetted by national, sub-national, and local government institutions mandated for emergency response.	N/A	1	2	3	4	5	
6.2	Your organization ensures that the roles, responsibilities, capacities, and interests of different stakeholders are identified and considered when designing, planning, and implementing programs.	N/A	1	2	3	4	5	
6.3	Your organization ensures that an inclusive coordination platform is established for each project, with regular consultations scheduled and proceedings made openly available.	N/A	1	2	3	4	5	
6.4	Your organization ensures that all information relevant for project implementation are made openly available to all.	N/A	1	2	3	4	5	
6.5	Your organization ensures that institutional policies for administration, human resources, finance, and resource mobilization are reviewed to accommodate the suggested actions above.	N/A	1	2	3	4	5	

CHS 7: Learning from experience so that the support we give communities improves over time.								**Remarks**
7.1	Your organization ensures that the project formulation takes into consideration experiences and lessons learnt in previous and similar crises.	N/A	1	2	3	4	5	
7.2	Your organization ensures that lessons learnt are documented and made available to all.	N/A	1	2	3	4	5	

7.3	Your organization ensures that institutional policies for administration, human resources, finance, and resource mobilization are reviewed to accommodate the suggested actions above.	N/A	1	2	3	4	5	
7.4.	Your organization is an active member of learning and innovation forums.	N/A	1	2	3	4	5	

CHS 8: Ensuring that the people who work for us have the skill and experience to support communities.								Remarks
8.1	Your organization ensures that the staff members are recruited based on a written recruitment policy in compliance with national labor laws.	N/A	1	2	3	4	5	
8.2	Your organization ensures that the staff members are provided with clear and comprehensive job descriptions.	N/A	1	2	3	4	5	
8.3	Your organization has established a Code of Conduct that considers different terms and conditions that may apply to the staff members of different types or levels.	N/A	1	2	3	4	5	
8.4	Your organization ensures that recruited staff members are provided with an orientation program to make them aware of organizational values, institutional policies, and CHS.	N/A	1	2	3	4	5	
8.5	Your organization ensures that the capacity building for the staff members is carried out appropriately to make them competent in delivering services.	N/A	1	2	3	4	5	
8.6	Your organization ensures that policies are in place to develop humanitarian competencies for the security and the wellbeing of the staff members, and that such policies are communicated clearly to them.	N/A	1	2	3	4	5	

CHS 9: Managing resources in a way that is responsible, limits waste, and has the best result for the community.								Remarks
9.1	Your organization ensures that CHS 1.14 above (Your organization identifies strategies for adequate funding and creates accurate budgets for feasible interventions.) is operationalized.	N/A	1	2	3	4	5	
9.2	Your organization ensures that the expenses of activities are monitored and evaluated against the budget.	N/A	1	2	3	4	5	
9.3	Your organization ensures that efficient but competitive procurement policies and practices of goods and services in the event of surge capacity demands are put in place.	N/A	1	2	3	4	5	
9.4	Your organization ensures that policies for environmental safety during resource utilization and waste disposal is put in place.	N/A	1	2	3	4	5	

III. Guidance Notes

The Core Humanitarian Standard (CHS) facilitates the improvement of the quality and effectiveness of humanitarian response by organizations and individuals to prevent and alleviate human suffering during emergencies. As people affected by disasters or conflicts have the right to receive protection and assistance and to ensure the basic conditions for life with dignity, the CHS describes the actions needed to enable crisis-affected people to enjoy this right. It has nine commitments. The CHS ensures that the communities and people affected by crisis can expect:

1. To receive assistance that is appropriate and relevant to their needs;
2. To have access to the humanitarian assistance they need at the right time;
3. That they are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action;
4. To know their rights and entitlements, have access to information and participate in decisions that affect them;
5. To have access to safe and responsive mechanisms to handle complaints;
6. To receive coordinated, complementary assistance;
7. Delivery of improved assistance as organizations learn from experience and reflection;
8. To receive the assistance they require from competent and well-managed staff and volunteers; and
9. That the organizations assisting them are managing resources effectively, efficiently and ethically.

The CHSAT has several segments. The segment on institutional profile seeks organizational information. It is followed by nine segments, each segment representing one of the nine commitments of the CHS. Responses for these nine segments will be based on a five-point scale described in the tool. The first assessment serves to provide baseline information or status quo. Subsequent assessments in regular intervals (e.g., monthly, quarterly, semiannually, or annually) may be used to track improvements. The CHSAT may be locally adapted to suit the local context for better implementation of humanitarian interventions and CHS compliance. It may also be translated into local languages.

Relevant information about CHS is provided as annexes to this document. It is important to note that since the CHSAT is a self-assessment tool, its results are intended to be used primarily by local humanitarian organizations to formulate and implement interventions for local humanitarian actors to improve their adherence to the CHS.

Guidance for Use of the Tool

1. The tool has been designed to help organizations assess changes in the integration of the CHS into their humanitarian work. Consequent to the first assessment to benchmark the status quo, consider taking and retaking this assessment on an annual or biannual basis to track improvements.

2. Identify a few individuals within your organization to take this assessment. They could include the Chief Executive Officer (CEO), members of the board of directors, leadership team members, employees, and well-informed external stakeholders. The self-assessment is to be done by the institution and not by its individual members. Note that the self-assessment may be facilitated by an independent resource person.

3. Some of the indicators may not be relevant for your organization. Mark them in the 'Not Applicable' (N/A) column given in the tool. The measurement rubric to be detailed later considers only the indicators to which responses are made so that the final tally is not negatively affected. A column for remarks provides additional space to justify the non-relevancy of the indicator to a particular responder. Moreover, the remarks column may be used to write the explanation for choosing a specific numerical answer. It may also be utilized to provide recommendations for further action to improve on the specific indicator.

4. Thereafter, as a team, discuss any areas of disagreement, seeking to find consensus on the five-level assessment (rankings) given for each question.

5. Identify needs for localization and adopt based on consensus.

Measurement

The questions for assessment are intended to enable the measurement of progress and/or comparison across the timeline of programs, projects, and contexts. To be meaningful, responses need to be measured in a way that is consistent across time and location. The tool allows for disaggregation of responses on the type of humanitarian organization. Indicators in the tool use Likert scales as a five-point bipolar response ranging from a group of categories – from one (1) as least to five (5) as most.

A five-level assessment rubric* is given below, for use in qualitatively ranking the toolkit indicators.
   1. *No, not currently.*
   2. *No, we are in the process of developing it.*
   3. *Sometimes.*
   4. *Yes, we are at the beginning stages.*
   5. *Yes, always.*

1. Achievements are minor and there are few signs of planning or forward action to improve the situation.
2. Achievements have been made but are relatively small or incomplete, and while improvements are planned, the commitment and capacities are limited.
3. There us some commitment and capacities to achieving disaster risk reduction (DRR) but progress cannot be considered positive.
4. Substantial achievement has been attained, but with some recognized deficiencies in commitment, financial resources, or operational capacities.
5. Comprehensive achievement has been attained, with the commitment and capacities to sustain efforts at all levels.

Note: In adopting the tool and contextualizing to each country, the need may arise to tailor the five-level assessment descriptions, to make them more relevant to local realities.

These provide ordinal data as ranked responses. A nonparametric procedure based on the rank and frequency of response for each rank can be used as percentages to generate bar charts when responses to individual questions are taken for consideration.

Should an indicator does not apply to your organization, you may choose N/A (not applicable). Indicators that generate N/A responses shall be taken out from the computation of scores. Moreover, the remarks column may be used to write the explanation for choosing a specific numerical answer. It may also be used to write recommendations for further action to improve on the specific indicator.

Individual Indicators

Where the analysis is required to ascertain whether response to an individual indicator was positive, moderate, or negative. A literature advocates the median should be taken to be rank 3. A score of below 3 should be taken as a negative perception. This will require interventions for enhancement. A simple bar chart may be used to indicate the scores.

Self-Assessment Score

A self-assessment score may be measured and analyzed in each segment of the tool. An aggregated score may also be used for the measurement and analysis of the whole tool. The median for the questions should be taken to be rank 3. The total score for the number of responses for all five ranks should be calculated as $[(n_1 \times 1) + (n_2 \times 2) + (n_3 \times 3) + (n_4 \times 4) + (n_5 \times 5)]$ where n_x represents the number of responses for each rank. If the average score is 1.00 to 2.00, it is considered as a minor achievement. An average score of 2.01 to 3.00 is taken to be a moderate achievement while an average score of 3.01 to 4.00 is considered as a substantial achievement. Finally, an average score of 4.01 to 5.00 means a comprehensive achievement. An average score of 3.00 or less indicates the need for interventions to improve engagement.

Given that the assessment allows users to omit indicators as appropriate, an average score will be calculated to better reflect the perception. Those questions marked as N/A (not applicable) should be taken out from the computation.

$$\text{Avg. score} = [(n_1 \times 1) + (n_2 \times 2) + (n_3 \times 3) + (n_4 \times 4) + (n_5 \times 5)] / N$$
$$\text{Where } N = (n_1 + n_2 + n_3 + n_4 + n_5)$$

Interpretation of the Self-Assessment Score

Average score of 1.00 to 2.00 means minor achievement
Average score of 2.01 to 3.00 means moderate achievement
Average score of 3.01 to 4.00 means substantial achievement
Average score of 4.01 to 5.00 means comprehensive achievement

After the Assessment

1. After completing the self-assessment, separately tabulate the score for each indicator in the CHSAT. This will provide you with discrete areas that are strong (with an average score of 3.01 to 5.00), and discrete areas that need strengthening (with an average score of 3.00 or lower). By identifying the areas of greatest need, you will be better equipped to focus on specific areas of concern.

2. Calculate the score for each dimension or segment of the tool. For the complete tool kit or a segment of the tool kit, the median for the questions should be taken to be rank 3. The total score for the number of responses for all five ranks should be calculated as $[(n_1 \times 1) + (n_2 \times 2) + (n_3 \times 3) + (n_4 \times 4) + (n_5 \times 5)]$ where n_x represents the number of responses for each rank.
   a. Since it allows omitting indicators (N/A column) as appropriate, for better reflection of the perception, average score shall be calculated.
   b. Average score = $[(n_1 \times 1) + (n_2 \times 2) + (n_3 \times 3) + (n_4 \times 4) + (n_5 \times 5)] / N$
      where $N = (n_1 + n_2 + n_3 + n_4 + n_5)$
   c. Interpretation
      Average score of 1.00 to 2.00 means minor achievement
      Average score of 2.01 to 3.00 means moderate achievement
      Average score of 3.01 to 4.00 means substantial achievement
      Average score of 4.01 to 5.00 means comprehensive achievement

3. The assessment team should brainstorm on the results and conceptualize the capacity building initiatives needed for the adoption, application, and implementation of the Core Humanitarian Standard as the crucial next step. The viewpoint of an external expert will support in developing the capacity-building initiatives. It is also important to determine the

stakeholders who will be engaged in the capacity-building initiatives and the required time duration.

4. It is recommended to present such conceptualization to a larger group of internal and external stakeholders engaged in humanitarian work of the organization for discussion and validation. It is worth noting that the tool intends to guide the institution to create better policies, plans, programs, projects, and activities.

5. An action plan with a timeline should be developed. It could then be implemented with proper funding and resource inputs.

6. Decide on retaking the assessment in consensus with the larger group of stakeholders.

Annex A

Background and Rationale

Objective

The Core Humanitarian Standard (CHS) facilitates the improvement of the quality and effectiveness of humanitarian response by organizations and individuals, to prevent and alleviate human suffering during emergencies. The Core Humanitarian Standard Assessment Tool (CHSAT) endeavors to assist in the self-evaluation of the status of the institutionalization of the CHS into organizations involved in humanitarian assistance for people affected by disasters. The findings of the assessment will pave the way to formulate and implement interventions to improve adherence to the CHS.

Asian Preparedness Partnership (APP)

The APP is a regional partnership comprised of national and local governments, non-governmental organizations (local NGOs), civil society groups, the private sector, the academia, and media in Cambodia, Myanmar, Nepal, Pakistan, the Philippines, and Sri Lanka, with secretariat support from ADPC, Thailand, under the aegis of BMGF and USAID BHA. The APP promotes and supports locally led actions to prepare for, respond to, and recover from disasters, commonly referred to as *"localization."* The APP defines localization as a process of which local, sub-national, and national humanitarian actors take a lead role, in a collaborative manner, to plan and implement priority actions in disaster preparedness, humanitarian response, and recovery through mobilizing internal resources and external humanitarian funding.

The goal of the APP is to improve the preparedness and emergency response to disasters by strengthening the interface between the government, local humanitarian organizations, the private sector, the academia, and media to enhance capacities through partnerships, information and knowledge exchange, resource sharing, trainings, and networking.

APP Phase 1

The APP Phase 1 (2016 to 2019) mobilized key local actors in six countries – Cambodia, Myanmar, Nepal, Pakistan, the Philippines, and Sri Lanka – to establish the APP as a regional forum. Consequently, the country partners of APP formed the national preparedness partnerships in each country, with the government DRM nodal points, local non-government organizations (NGOs), and the private sector for the enhancement of emergency response. The academia and media also contribute to these national partnerships. In APP Phase 1, a Baseline Survey of hazards, vulnerability, risk and institutional capacity of the partner countries was conducted to

inform national and regional interventions.[1] The Baseline Survey endeavored to collect responses from the APP partners on their humanitarian accountability and standards. Affiliation with humanitarian standards was assessed based on the following three criteria:

- Certification / Acknowledgement of the Humanitarian Accountability Partnership (HAP);
- Acknowledgement of the Sphere Standards; and
- Certification / Acknowledgement of the Core Humanitarian Standard (CHS).

Responses obtained are provided in the color-coded Table 1 below. The Table also provides where no responses were made.

Table 1. Responses for affiliation
with Humanitarian Accountability and Standards form the APP Partners

Humanitarian Accountability and Standards		Cambodia		Myanmar		Nepal		Pakistan		Philippines		Sri Lanka	
		Gov.	LNGO	Gov.	LNGO	Gov.	LNGO	Gov.	LNGO	Gov.	LNGO	Gov.	LNGO
HAP	Certified												
	acknowledged												
SPHERE STANDARDS	acknowledged												
CHS	Certified												
	acknowledged												

Legend:
- <30% V. Low
- 30 – 50% Low
- 50 – 60% Moderate
- 60 – 80% High
- <80% V. High
- No Response

In Cambodia, responses for certification and acknowledgement of the HAP are very low in the government organizations and high with LNGO. Responses for acknowledgement of the Sphere Standards is high for both sectors. Certification of the CHS is very low for both sectors. Responses for acknowledgement of the CHS is low for government sector but high for LNGO.

In Myanmar, responses for LNGO indicate low acknowledgement of the HAP and very low acknowledgement of both Sphere Standards and the CHS.

In Nepal, responses for certification of the HAP and the CHS as well as acknowledgement of the Sphere Standards are very high for the government sector. Acknowledgement of the HAP and the Sphere Standards is moderate for the LNGO sector and low for the CHS.

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[1]ADPC (2018). Regional Synthesis Report Baseline of Humanitarian Ecosystems in Asia. Second Edition. Bangkok, Thailand: Asian Disaster Preparedness Center (ADPC).

In Pakistan, responses for certification are very low for the HAP and the CHS for both government and LNGO sectors. Responses for acknowledgement of the HAP are very high for LNGO and high for the government sector. Acknowledgement is very high for the Sphere Standards in both sectors.

In the Philippines, certification and acknowledgement are very low for the HAP, Sphere Standards, and the CHS in the government sector. In the LNGO, certification is moderate, but acknowledgement is very high for the HAP and the CHS. LNGO response for acknowledgement is also very high for the Sphere Standards.

In Sri Lanka, in the LNGO sector, certification is very low for both the HAP and the CHS. Responses for acknowledgement of the HAP and the CHS are moderate while acknowledgement for the Sphere Standards is very low.

APP Phase 2

In the APP Phase 2, the overall scope is to build on the success and progress of the APP Phase 1 while scaling up and scaling out its outreach regionally and globally to have a greater impact on supporting the locally led disaster preparedness, response, and recovery actions. The three primary outcomes of the APP Phase 2 are as follows:
1. Increased locally led actions to prepare for, respond to, and recover from disasters in selected high-risk countries of Asia;
2. Institutionalized efficient and cost-effective innovative approaches for locally led disaster risk management (DRM) actions; and
3. Strengthened enabling environment for humanitarian system transformation through regional cooperation and global outreach.

To achieve the primary outcome 1, its intermediate outcome of institutionalizing humanitarian standards among local actors must be realized. People affected by disasters or conflicts have the right to receive protection and assistance and to ensure the basic conditions for life with dignity. The Core Humanitarian Standard (2014) describes the actions needed to enable crisis-affected people to enjoy this right.[2]

A specific output under this primary outcome pertains to the development, testing, and usage of self-assessment toolkits – the Core Humanitarian Standard Assessment Tool (CHSAT) and the Institutional Capacity Assessment Tool (ICAT) – endeavoring to assist the development of locally adapted tools in APP countries for better implementation of humanitarian interventions and CHS compliance. In most countries, the holistic compliance with this new paradigm is yet to be achieved. Therefore, the initial assessment is expected to reveal many gaps in compliance. The

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[2]https://spherestandards.org/humanitarian-tandards/#:~:text=Humanitarian%20standards%20are%20statements
retrieved 10th October 2020

tools CHSAT and ICAT would help to benchmark the status quo in 2021 and facilitate assessment of incremental progress across a timeline into the future.

Needs Assessment for Tool Development

Engagement and willingness to incorporate the CHS in relief and response efforts is part of a holistic engagement for a more consistent, harmonized, coordinated, and regulated humanitarian and emergency response through the collaboration of local partners[3].

The formulation of the self-assessment toolkits was preceded by a survey involving national disaster management organizations (NDMOs), local non-government organizations (LNGOs), and the private sector in APP countries. The main purpose of the survey was to acquire an insight into the level of awareness on global humanitarian standards and their adaptation among the local humanitarian organizations. The survey report is available as an internal ADPC document.

The survey results revealed that there are no locally adapted guidelines available in APP countries. The status quo of integrating the CHS into emergency response systems varied in different countries and in the different sectors of stakeholders sampled. The need for localization of existing global humanitarian standards, making available humanitarian standards in local languages, followed by adequate training, were recognized by all respondents. The survey also revealed a desire to review available institutional policies on administration, human resources, and finance aligned to the CHS.

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[3]Adopted from Christian Blind Mission CBM (2018) Core Humanitarian Standard - Self-Assessment Final Report.

Annex B

Global Initiatives on Humanitarian Action

Humanitarian Action

Humanitarian action, once exclusively focused on armed conflict and refugees, is now considered to include response to natural and manmade disasters. Good Humanitarian Donorship Initiative (2003)[4] defines the objectives of humanitarian action as saving of lives, alleviation of suffering, and maintaining human dignity during and in the aftermath of crises and natural disasters, as well as preventing and strengthening preparedness for the occurrence of such situations.

According to the Active Learning Network for Accountability and Performance in Humanitarian Action or ALNAP (2016)[5], "*Humanitarian action includes responding to a crisis, supporting preparedness and disaster risk reduction (DRR) before a crisis, and recovery and rehabilitation afterwards – although preparedness and recovery fall between humanitarian and long-term development activities. There is a growing recognition of the importance of addressing recovery needs in the immediate wake of a natural disaster. In conflicts and other protracted crises, it is often unclear when the emergency ends and recovery begins. In practice, both types of support are often needed and provided simultaneously*".

Conceptualizing the Humanitarian System

The Active Learning Network for Accountability and Performance in Humanitarian Action or ALNAP (2015)[6] defines the humanitarian system as "*the network of interconnected institutional and operational entities through which humanitarian assistance is provided when local and national resources are insufficient to meet the needs of the affected population*". There is also the growing acceptance that saving livelihoods is also an important element of humanitarian action.

Humanitarian Principles

These govern the way humanitarian response is carried out. The four principles of humanity, neutrality, impartiality, and operational independence represent the ethical foundation for

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[4]Good Humanitarian Donorship Initiative, (2003), International meeting on good humanitarian donorship. Stockholm: GHD. (www.alnap.org/resource/22940.aspx). retrieved 10 October 2020.
[5]ALNAP (2016) Evaluation of Humanitarian Action Guide. ALNAP Guide. London: ALNAP/ODI.
[6]State of the Humanitarian System (Ed. 2015).

stakeholders carrying out humanitarian work in emergencies[7]. The four principles are defined below.

Humanitarian Principles			
Humanity	**Neutrality**	**Impartiality**	**Operational Independence**
Human suffering must be addressed wherever it is found. The purpose of humanitarian action is to protect life and health and ensure respect for human beings.	Humanitarian actors must not take sides in hostilities or engage in controversies of a political, racial, religious or ideological nature.	Humanitarian action must be carried out on the basis of need alone, giving priority to the most urgent cases of distress and making no distinction on the basis of nationality, race, gender, religious belief, class or political opinions.	Humanitarian action must be autonomous from the political, economic, military or other objectives that any actor may hold with regard to areas where humanitarian action is being implemented.

The humanitarian principles have resulted from the work of the International Committee of the Red Cross and the national Red Cross/Red Crescent Societies. The first three principles (humanity, neutrality, and impartiality) were endorsed by the UN General Assembly in 1991. Operational Independence as a fourth key principle was endorsed in 2004.

Accountability to Affected Populations (AAP)

The Accountability to Affected Populations (AAP) is now recognized as an additional humanitarian principle, supplementing the traditional four mentioned above. There are many definitions of the AAP. The GAP Framework (2005)[8] defines it as "*the processes through which an organization makes a commitment to respond to and balance the needs of stakeholders in its decision-making processes and activities, and delivers against this commitment*".

The Code of Conduct Principle 9 for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief, adopted by the Steering Committee for Humanitarian Response (SCHR) in 1994, states that "*We hold ourselves accountable to both those we seek to assist and those from whom we accept resources*". The core commitments for accountability have been endorsed by the Inter Agency Standing Committee (IASC) as Transformative Agenda Protocols[9], and provide the normative AAP framework.

Humanitarian Accountability Partnership (HAP)

The Humanitarian Accountability Partnership (HAP) was established in 2003 to promote accountability to people affected by humanitarian crises and to acknowledge those organizations

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[7]https://www.unocha.org/sites/dms/Documents/OOM-humanitarianprinciples_eng_June12.pdf retrieved 01 October 2020.
[8]http://www.oneworldtrust.org/uploads/1/0/8/9/108989709/pathways_to_accountability_the_gap_framework_lo_res_.pdf retrieved 20 Oct 2020
[9]https://interagencystandingcommittee.org/iasc-transformative-agenda retrieved 20 October 2020.

that meet the HAP Principles of Accountability, which the founding members developed as a condition of HAP membership. It was revised in 2010.

The HAP Standard can apply to all types of local, national, and international organizations that assist or act on behalf of people affected by or prone to disasters, conflict, poverty, or other crises.

Core Humanitarian Standard (CHS)[10]

In 2006, the Quality and Accountability Initiatives Complementarities Group was established to link and replace existing humanitarian standards such as the 2010 HAP Standard, People In Aid's Code of Good Practice (2003), and the former Sphere Project's Core Standards (1998) that is now replaced by Sphere Handbook. The 2010 earthquake in Haiti and the 2010 floods in Pakistan highlighted once again the gaps between the aid that was needed and that which was provided. Such events illustrated the need for greater effectiveness, impact, accountability, and quality in humanitarian action.

The Humanitarian Accountability Partnership (HAP), People In Aid, and the Sphere came together under the Joint Standards Initiative (JSI) with the common goal of making it simpler and easier for aid workers to implement standards. The JSI consultation in 2013, which received feedback from more than 2,000 humanitarian and development practitioners, found that there was a desire for the following:
- More harmonization among standards, with common terminologies;
- More awareness of, and guidance for standards;
- An architecture that links the various standards together; and
- Putting communities and people affected by crisis, and humanitarian principles at the heart of standards in the sector.

As a result of the JSI process, the Core Humanitarian Standard was formulated. It was launched in December 2014 to support the harmonization process.

As a core standard, the CHS describes the essential elements of principled, accountable, and high-quality humanitarian action. Humanitarian organizations may use it as a voluntary code with which to align their own internal procedures. It can also be used as a basis for verification of performance, for which a specific framework and associated indicators have been developed to ensure relevance to different contexts and types of organization.

The CHS draws together key elements of existing humanitarian standards and commitments. These include but are not limited to:
- The Code of Conduct for The International Red Cross and Red Crescent Movement and NGOs in Disaster Relief[11];

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[10]https://corehumanitarianstandard.org/the-standard/history retrieved 20 October 2020
[11]https://www.icrc.org/en/doc/assets/files/publications/icrc-002-1067.pdf retrieved 10 October 2020.

- The 2010 HAP Standard in Accountability and Quality Management[12];
- The People In Aid Code of Good Practice in the Management and Support of Aid Personnel[13];
- The Sphere Handbook Core Standards and the Humanitarian Charter[14];
- The Quality COMPAS[15];
- The Inter-Agency Standing Committee Commitments on Accountability to Affected People/Populations (CAAPs)[16]; and
- The Organization for Economic Co-operation and Development's (OECD) Development Assistance Committee (DAC) Criteria for Evaluating Development and Humanitarian Assistance[17].

Nine Commitments of the CHS and Quality Criteria

1. Communities and people affected by crisis receive assistance appropriate and relevant to their needs. *(Quality Criterion: Humanitarian response is appropriate and relevant.)*

2. Communities and people affected by crisis have access to the humanitarian assistance they need at the right time. *(Quality Criterion: Humanitarian response is effective and timely.)*

3. Communities and people affected by crisis are not negatively affected and are more prepared, resilient, and less at-risk as a result of humanitarian action. *(Quality Criterion: Humanitarian response strengthens local capacities and avoids negative effects.)*

4. Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them. *(Quality Criterion: Humanitarian response is based on communication, participation, and feedback.)*

5. Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints. *(Quality Criterion: Complaints are welcomes and addressed.)*

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[12] https://reliefweb.int/report/world/2010-hap-standard-accountability-and-quality-management-enar retrieved 10 October 2020.

[13] https://reliefweb.int/report/world/people-aid-code-good-practice-management-and-support-aid-personnel retrieved 10 October 2020.

[14] https://spherestandards.org/handbook-2018/ retrieved 10 October 2020.

[15] https://www.urd.org/en/project/the-quality-and-accountability-compass-method/ retrieved 10 October 2020.

[16] https://interagencystandingcommittee.org/system/files/legacy_files/ retrieved 10 October 2020.

[17] https://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm retrieved 10 October 2020.

6. Communities and people affected by crisis receive coordinated, complementary assistance. *(Quality Criterion: Humanitarian response is coordinated and complementary.)*

7. Communities and people affected by crisis can expect delivery of improved assistance as organizations learn from experience and reflection. *(Quality Criterion: Humanitarian actors continuously learn and improve.)*

8. Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers. *(Quality Criterion: Staff are supported to do their job effectively, and are treated fairly and equitably.)*

9. Communities and people affected by crisis can expect that the organizations assisting them are managing resources effectively, efficiently and ethically. *(Quality Criterion: Resources are managed and used responsibly for their intended purpose.)*

Nine Commitments of the Core Humanitarian Standard (CHS)
Source: https://corehumanitarianstandard.org/the-standard

The CHS Certification is a four-year cycle and is open to CHS Alliance members and non-members. It attests that an organization or any part of it that has requested the certification, meets the requirements of the Core Humanitarian Standard (CHS)[18]. Meanwhile, the CHS Independent Verification provides organizations with an external, independent assessment of capacity, and

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[18]https://www.chsalliance.org/files/files/Resources/Standards/2010-hap-standard-in-accountability.pdf retrieved 10 October 2020.

improvement against the CHS. Undertaken by an independent third party, the process involves document reviews, interviews with key staff, partners and communities and people affected by crisis, as well as direct observation at selected project sites.[19]

Sphere Standards

The Sphere Standards is based on two core beliefs: first, that all possible steps should be taken to alleviate human suffering arising out of calamity and conflict; and second, that those affected by disaster have a right to life with dignity and therefore a right to assistance. The Sphere Standards is three things: a handbook; a broad process of collaboration; and an expression of commitment to quality and accountability.

The Humanitarian Charter and identified Minimum Standards are to be attained in disaster assistance, in each of five key sectors (water, supply, and sanitation; nutrition; food aid; shelter; and health services). The Sphere Standards Board has fully endorsed the CHS[20].

Humanitarian Charter[21]

The Humanitarian Charter forms the basis of a commitment by humanitarian agencies that endorse the Sphere Standards and an invitation to all those who engage in humanitarian action to adopt the same principles. These include the rights to protection and assistance reflected in the provisions of international humanitarian law, human rights, and refugee law. The charter centers around the following rights:
- The right to life with dignity;
- The right to receive humanitarian assistance; and
- The right to protection and security.

The charter leads to 4 protection principles:
1. Enhance people's safety and dignity and rights and avoid exposing them to further harm;
2. Ensure people's access to impartial assistance, according to need and without discrimination;
3. Assist people to recover from physical and psychological effects of threatened or actual violence, coercion, or deprivation; and
4. Help people claim their rights.

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[19] https://www.chsalliance.org/verify/certification/ retrieved 10 October 2020.

[20] https://ec.europa.eu/echo/files/evaluation/watsan2005/annex_files/Sphere standards/SPHERESTANDARDS4%20-%20What%20is%20Sphere standards.pdf retrieved 10 October 2020.

[21] Sphere Association. The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response, fourth edition, Geneva, Switzerland, 2018. www.spherestandards.org/handbook retrieved 10 October 2020

The CHS replaced the former Sphere Core Standards as one of the Sphere Handbook's foundation chapters. The Standard does not replace Sphere Humanitarian Charter, Protection Principles, or the other minimum standards included in the Handbook technical chapters. It is part of an integrated approach to quality and accountability.