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# **Institutional Capacity Assessment Tool**

## **On Compliance to the Core Humanitarian Standard**

**(09 March 2022)**

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## **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 Institutional Capacity Assessment Tool (ICAT) was developed. It is important to note that since the ICAT 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 institutional and operational capacities.

The ICAT has several segments. The segments on institutional profile and institutional structure seek organizational information. These are followed by segments on institutional policy, plans, and guidelines; financial management; human resource development; project formulation, implementation, monitoring, and evaluation; knowledge management; communication strategy; and external relations. Responses for these 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 ICAT may be locally adapted to suit the local context for improved institutional and operational capacities of the organizations involved in humanitarian assistance. It may also be translated into local languages.

Organizations using the ICAT 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 ICAT 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.



**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.

2. Institutional Policy, Plans, and Guidelines								Remarks
2.1	Your institutional policies are aligned with the national policy for emergency management.	N/A	1	2	3	4	5	
2.2	Your organization has a documented emergency response policy.	N/A	1	2	3	4	5	
2.3	Your organization has a documented emergency response plan.	N/A	1	2	3	4	5	
2.4	Your institutional policies have been reviewed to accommodate the nine commitments of the Core Humanitarian Standard (CHS).	N/A	1	2	3	4	5	
2.5	Your organization has a documented human resources policy that includes staff safety and security measures such as occupational hazard insurance.	N/A	1	2	3	4	5	
2.6	Your organization has a documented recruitment policy.	N/A	1	2	3	4	5	
2.7	Your organization has a documented gender-sensitive workplace guideline.	N/A	1	2	3	4	5	
2.8	Your organization has a documented workplace harassment prevention guideline.	N/A	1	2	3	4	5	
2.9	Your organization has a documented multi-hazard emergency management plan.	N/A	1	2	3	4	5	
2.10	Your organization has a contingency plan for surge capacity management.	N/A	1	2	3	4	5	
2.11	Your organization has a recovery framework for staff guidance.	N/A	1	2	3	4	5	
2.12	Your organization has a Code of Conduct for the staff members during emergency response.	N/A	1	2	3	4	5	
3. Financial Management								Remarks
3.1	Your organization has a standardized accounting system.	N/A	1	2	3	4	5	
3.2	Your organization has a standardized financial reporting system.	N/A	1	2	3	4	5	
3.3	Your organization has regular annual financial audits.	N/A	1	2	3	4	5	
3.4	Your financial management has documented guidelines for financial transactions during emergency management.	N/A	1	2	3	4	5	

3.5	The annual budgets of your organization complement the scheduled activities of the emergency response plan.	N/A	1	2	3	4	5	
<b>4. Human Resource Development</b>								<b>Remarks</b>
4.1	Your organization ensures staff adequacy for undertaking identified emergency response activities.	N/A	1	2	3	4	5	
4.2	Your organization ensures that the staff members are given orientation about the policies, plans, and guidelines of the institution.	N/A	1	2	3	4	5	
4.3	Your organization ensures that the staff members are made competent to deliver preparedness and emergency response services through capacity building interventions that are based on a capacity needs assessment.	N/A	1	2	3	4	5	
4.4	Your organization ensures that the staff members are given documented roles and responsibilities.	N/A	1	2	3	4	5	
4.5	Your organization ensures that the staff members are given training on standard operating procedures (SOPs) developed for the institution.	N/A	1	2	3	4	5	
<b>5. Project Formulation, Implementation, Monitoring and Evaluation</b>								<b>Remarks</b>
5.1	Your organization ensures that written procedure and guidelines are made available to a dedicated project formulation unit.	N/A	1	2	3	4	5	
5.2	Your organization ensures that risk information and community needs are made mandatory for project formulation.	N/A	1	2	3	4	5	
5.3	Your organization ensures that an implementation plan as well as monitoring and evaluation strategies are made mandatory for projects undertaken.	N/A	1	2	3	4	5	
5.4	Your organization ensures that incorporation of lessons learnt from previous project implantation are documented and given due consideration.	N/A	1	2	3	4	5	
5.5	Your organization ensures that the integration of an 'exit strategy' is made compulsory for project implementation.	N/A	1	2	3	4	5	
<b>6. Knowledge Management</b>								<b>Remarks</b>
6.1	Your organization has a documented knowledge management strategy.	N/A	1	2	3	4	5	
6.2	Your organization documents lessons learnt.	N/A	1	2	3	4	5	
6.3	Your organization has a knowledge database for emergency response that is updated regularly.	N/A	1	2	3	4	5	

6.4	Your institutional knowledge database is accessible to all stakeholders.	N/A	1	2	3	4	5	
<b>7. Communication Strategy</b>								<b>Remarks</b>
7.1	Your organization has a documented communication strategy for emergency management.	N/A	1	2	3	4	5	
7.2	Your organization has a communication nodal point for external communication.	N/A	1	2	3	4	5	
7.3	Your organization has a multi-hazard communication plan.	N/A	1	2	3	4	5	
7.4	Your institutional communication channels can reach every household located in at-risk communities.	N/A	1	2	3	4	5	
<b>8. External Relations</b>								<b>Remarks</b>
8.1	Your organization has a functional coordinating platform that is inclusive in nature.	N/A	1	2	3	4	5	
8.2	Your organization has good coordination with governmental nodal point for emergency management.	N/A	1	2	3	4	5	
8.3	Your organization has good coordination with the local government.	N/A	1	2	3	4	5	
8.4	Your organization facilitates partnerships with the private sector.	N/A	1	2	3	4	5	
8.5	Your organization fosters networking with local non-government organizations (NGOs), international NGOs, and donor community.	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 ICAT has several segments. The segments on institutional profile and institutional structure seek organizational information. These are followed by segments on institutional policy, plans, and guidelines; financial management; human resource development; project formulation, implementation, monitoring, and evaluation; knowledge management; communication strategy; and external relations. Responses for these 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 ICAT may be locally adapted to suit the local context for improved institutional and operational capacities of the organizations involved in humanitarian assistance. It may also be translated into local languages.

Relevant information about CHS is also provided as annexes to this document. It is important to note that since the ICAT 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 institutional and operational capacities.

### **Guidance for Use of the Tool**

1. The tool has been designed to help organizations assess changes in their own institutional and operational capacities in view of integrating 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. Questions 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 is 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 ranked 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 ICAT. 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 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.
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 Institutional Capacity Assessment Tool (ICAT) on Compliance to the CHS 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.<sup>1</sup> 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	<30%	60 – 80%	<30%	<30%	<80%	<30%	<30%	<30%	<30%	<30%	<30%	<30%
	acknowledged	<30%	60 – 80%	<30%	<30%	<80%	<30%	50 – 60%	<30%	<30%	<30%	<30%	<30%
SPHERE STANDARDS	acknowledged	60 – 80%	60 – 80%	<30%	<30%	<80%	<30%	<30%	<30%	<30%	<30%	<30%	<30%
CHS	Certified	<30%	<30%	<30%	<30%	<80%	<30%	<30%	<30%	<30%	<30%	<30%	<30%
	acknowledged	<30%	60 – 80%	<30%	<30%	<30%	<30%	<30%	60 – 80%	<30%	<30%	<30%	<30%

  

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

<sup>1</sup>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.<sup>2</sup>

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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<sup>2</sup><https://spherestandards.org/humanitarian-standards/#:~:text=Humanitarian%20standards%20are%20statements>  
retrieved 10 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<sup>3</sup>.

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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<sup>3</sup>Adopted from Christian Blind Mission CBM (2018). Core Humanitarian Standards - 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)<sup>4</sup> 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)<sup>5</sup>, “*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)<sup>6</sup> 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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<sup>4</sup>Good Humanitarian Donorship Initiative, (2003), International meeting on good humanitarian donorship. Stockholm: GHD. ([www.alnap.org/resource/22940.aspx](http://www.alnap.org/resource/22940.aspx)). retrieved 10 October 2020.

<sup>5</sup>ALNAP (2016) Evaluation of Humanitarian Action Guide. ALNAP Guide. London: ALNAP/ODI.

<sup>6</sup>State of the Humanitarian System (Ed. 2015).

stakeholders carrying out humanitarian work in emergencies<sup>7</sup>. 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)<sup>8</sup> 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<sup>9</sup>, 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

<sup>7</sup>[https://www.unocha.org/sites/dms/Documents/OOM-humanitarianprinciples\\_eng\\_June12.pdf](https://www.unocha.org/sites/dms/Documents/OOM-humanitarianprinciples_eng_June12.pdf) retrieved 01 October 2020.

<sup>8</sup>[http://www.oneworldtrust.org/uploads/1/0/8/9/108989709/pathways\\_to\\_accountability\\_the\\_gap\\_framework\\_lo\\_res\\_.pdf](http://www.oneworldtrust.org/uploads/1/0/8/9/108989709/pathways_to_accountability_the_gap_framework_lo_res_.pdf) retrieved 20 October 2020.

<sup>9</sup><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)<sup>10</sup>**

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 Standards 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<sup>11</sup>;

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<sup>10</sup><https://corehumanitarianstandard.org/the-standard/history> retrieved 20 October 2020.

<sup>11</sup><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<sup>12</sup>;
- The People In Aid Code of Good Practice in the Management and Support of Aid Personnel<sup>13</sup>;
- The Sphere Handbook Core Standards and the Humanitarian Charter<sup>14</sup>;
- The Quality COMPAS<sup>15</sup>;
- The Inter-Agency Standing Committee Commitments on Accountability to Affected People/Populations (CAAPs)<sup>16</sup>; and
- The Organization for Economic Co-operation and Development's (OECD) Development Assistance Committee (DAC) Criteria for Evaluating Development and Humanitarian Assistance<sup>17</sup>.

## 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 welcomed and addressed.*)

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

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

<sup>14</sup><https://spherestandards.org/handbook-2018/> retrieved 10 October 2020.

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

<sup>16</sup>[https://interagencystandingcommittee.org/system/files/legacy\\_files/](https://interagencystandingcommittee.org/system/files/legacy_files/) retrieved 10 October 2020.

<sup>17</sup><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)<sup>18</sup>. Meanwhile, the CHS Independent Verification provides organizations with an external, independent assessment of capacity, and

<sup>18</sup><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.<sup>19</sup>

## **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<sup>20</sup>.

## **Humanitarian Charter<sup>21</sup>**

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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<sup>19</sup><https://www.chsalliance.org/verify/certification/> retrieved 10 October 2020.

<sup>20</sup>[https://ec.europa.eu/echo/files/evaluation/watsan2005/annex\\_files/Sphere\\_standards/SPHERESTANDARDS4%20-%20What%20is%20Sphere\\_standards.pdf](https://ec.europa.eu/echo/files/evaluation/watsan2005/annex_files/Sphere_standards/SPHERESTANDARDS4%20-%20What%20is%20Sphere_standards.pdf) retrieved 10 October 2020.

<sup>21</sup>Sphere Association. The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response, fourth edition, Geneva, Switzerland, 2018. [www.spherestandards.org/handbook](http://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.