UNICEF Consultation with Partners to Develop Standards and Indicators for Community Engagement

13– 14 November 2017, New York

Meeting Report

INTRODUCTION

Community engagement (CE) is a critical strategy for working with and involving local populations in any development or humanitarian context. Strengthening the quality, process and measurement of community engagement is key to building and strengthening local capacities, community structures, improving resource allocation and influencing policy at local and national level. Whether within development or humanitarian contexts, community engagement approaches that support communities to take their own action underpins efforts to ensure communities access and use social services, improve their well-being and develop greater resilience.

However, there are no agreed upon international or common standards for designing, implementing, supporting and measuring community engagement. While many organizations have developed metrics, implementation guidelines, standards and protocols that guide community engagement within their broader behaviour and social change communication approaches for both development and humanitarian interventions, the lack of standards, indicators, and agreed upon methodological approaches across implementing agencies limits coordination of community engagement activities and the synthesis and comparison of monitoring and evaluation data and processes. This makes reporting on outcomes of community engagement difficult and it can result in uneven practice, unclear accountability and limited impact.

This challenge has been acknowledged by several partners across a broad spectrum of development and humanitarian work. Building upon past efforts by other agencies to address this challenge, UNICEF hosted a technical workshop to discuss a way forward to enhancing community engagement on November 13 and 14, 2017 in New York (*Annex 1: Meeting Agenda*). **Twenty-eight participants** who represented a wide range of UN agencies, international NGOs and CSOs partners as well as donors and researchers joined the two day meeting *(Annex 2: List of participants)*.

The main purpose of the workshop was to achieve consensus on *key components* for the development of minimum quality standards, SOPs and indicators for community engagement in both development and humanitarian contexts, and to agree on *next steps* for issuing inter-agency minimum quality standards, SOPs and indicators for community engagement by early 2019. This convening built on recommendations from a previous technical workshop on community engagement in humanitarian settings convened by the Bill and Melinda Gates Foundation (BMGF) earlier in the year (see below for more details).

The New York workshop was informed by a discussion paper prepared and distributed to all attendees (Annex 3: Draft Discussion Paper). The paper suggested a framework, process and key questions for the development of minimum quality standards and related indicators for community engagement for consideration and debate during the consultation.

Background

This UNICEF initiative builds upon the work of UNICEF and key partner organizations. The World Health Organization (WHO), for instance, has been engaged in development of guideline for community engagement in health emergency programmes building upon its work on risk communication over the past two years. The community engagement guidelines will be accompanied by guidance and tools for measurement and will link up to the standards and indicators work initiated by UNICEF.

The Bill & Melinda Gates Foundation (BMGF) has been working with research scientists, development practitioners, health professionals, and policy-makers to guide mathematical modelling and quantitative testing using epidemiological and behaviour change data from 2014 – 2016 Ebola Outbreak in West Africa. This effort seeks to demonstrate linkages between behaviour change and disease transmission and contribute to an evidence base supporting more concerted efforts focus on community engagement and behaviour change in future health emergency responses. Participants at a workshop convened by the BMGF in April 2017 identified the need to develop minimum standards for community engagement and for these to be adopted internationally. The convening also recognized the relevance application of proceedings to development and public health system strengthening more broadly.

The International Federation of Red Cross Societies (IFRC) is working on the development of a set of indicators to track and measure their community engagement activities more coherently and to systematically build capacity of its volunteers. UNICEF is undertaking an effort to strengthen the positioning of community engagement within its communication for development (C4D) work to ensure there is a common understanding, use of minimum quality standards in its implementation and measurement of community engagement. This would include taking into account contextual factors and engagement of local leaders and coordination with partners engaged in CE from sub-national and national level through to the global level.

The development of agreed upon indicators for measuring behavioural outcomes and operational performance of community engagement interventions underlies all these efforts. Below we highlight key discussion points and issues, and recommendations to take this process forward.

HIGHLIGHTS OF DISCUSSIONS/KEY ISSUES

DAY 1.

1. Opening Session

The opening session - **the missing link in community systems strengthening**- set the context of the consultation. Vidhya Ganesh, emphasized the importance that UNICEF places on delivering results-based programs by working transparently with communities, and how CE is a not only a strategy that helps to achieve this goal but also a strategy that drives forward UNICEF's accountability vis-a-vis the communities it serves. In this sense, CE is a strategic process for groups to come together to address issues affecting their wellbeing. Whether in protection or health or education or outbreak response, the missing component of CE in community systems *is to work on a collective process* to take it to scale, and hence the importance UNICEF puts on this consultation meeting.

2. Trigger presentations – minimum quality standards and indicators.

Following this, Jamie Bedson presented an initial suggested frame for facilitating a discussion of minimum quality standards for CE. The framework suggests identifying activities within methodological, operational and integration/coordination components across a development-humanitarian cycle. The objective of the presentation mirrored that of the discussion paper. The frame suggests a starting point for understanding the various elements and components that make up community engagement, regardless of sector or approach. Using the program cycle reflects how standards have been developed in other context and places a focus on more granular elements of practice.

The parameters suggested included answering the following questions:
- What components and activities does community engagement consist of, and therefore what are we trying to systematically measure?
- Through and analysis of the activities and components of CE, can we identify what gaps exist or where improvement is needed to maximize impact?
- What elements are universal across development and humanitarian realms and different sectors? What areas of shared emphasis and focus exist that might provide a starting point for developing standards?
- Build upon what already exists cross a range of sectors and contexts and determine what's relevant from an inter-agency perspective and for government uptake.

The discussion following the proposed framework for **minimum quality standards for community engagement** was around the importance of this process and its implications for improved coordination and predictability of community engagement interventions. However, participants reinforced that the consensus building process, future consultations and agreeing on objectives and outcomes of the minimum quality standards requires bringing in more partners, especially those working in countries where we programme. Participants also emphasized the need to develop standards and indicators from already existing tools and resources which could facilitate buy-in of senior management and program implementers in the different organizations, and uptake among key partners at country and field level. Unpacking and clearly defining the key approaches of CE in

addition to their differences, and multiple areas of common agreement, in both humanitarian and development contexts was another major suggestion that participants thought could facilitate implementation in the future. The participants also recommended to look at CE as a cross cutting approach, in addition to a sectoral perspective, along with the need to define the "minimum of the minimum" standards and related set of indicators that could help measure CE, and to keep the indicators to a limited and realistic number. The involvement of governments as well as the communities themselves in the process was a recurrent point raised by the panellists, speakers, and majority of the meeting participants.

On measuring CE, Sharon Abramowitz presented the need to develop indicators and align new and existing indicators with the monitoring, evaluation and learning model that is integral to the programme cycle model within which CE operates. The presentation outlined the existing qualitative and quantitative CE indicators and how these indicators capture CE processes around culture, context, linguistic differences and other socio-cultural variables linked to development and humanitarian contexts. The presentation proposed developing a CE index to capture progress and to compare CE within programmes over time and across countries, and to ensure that CE data was inter-operable with other analytical and planning processes used in policy development and program implementation. The presentation emphasized the need to ensure that CE indicators followed the S.M.A.R.T. guidelines for indicator development: they need to be "Specific," "Measurable," "Assignable," "Realistic," and "Time Related."

Key discussions following the presentation on measuring CE highlighted that scaling up the quality of CE practices on the ground necessitates the provision of information collected from communities, sharing it back to them and keeping them involved in decisions affecting their well-being. Participants described a range of existing actors taking active efforts to develop CE indicators, CE technical tools, and CE standards, and noted that these activities would benefit from coordination and information sharing. Developing processes for validating CE practices and indicators for its measurement were underscored as a necessary missing component in the current practice. Meeting participants highlighted the importance of "contextualization" and "structured" local engagement in the development of indicators; and emphasized that CE indicators needed to be locally valid and acceptable. Discussions also included the importance of considering the link between CE and behaviour change taking into account the socio-cultural factors within the different contexts, when measuring the impact of the scaled-up approaches. Discussions on CE measurement ended with an agreement to consider the following three main domains for measuring CE: *(1)- Behaviour change indicators, (2)- Structural, socio-cultural, and contextual indicators, and (3)- Community capacity indicators*. Participants noted that CE indicators had targeted utility and capabilities depending on the level of analysis that was applied (e.g. International, national, district, local); and noted that CE indicators needed to be situation and use-appropriate and relevant to target audiences.

3a. Working Group – what should a framework for development of minimum quality standards look like?

For the identification of key **challenges and opportunities** related to the interagency work on standardizing CE and developing the indicators, the participants split in working groups. The outcomes of their brainstorming in terms of main **challenges** included the different organizational mandates and priorities which could highly impact the buy-in of the standards/indicators process and its final outputs, the limited operational capacity to work on that process, the lack of communication and coordination between agencies, the lack of connection to front line field staff resulting in insufficient reflection of real experiences from the ground, the low visibility of CE activities, and the multi-disciplinary nature of CE.

The major opportunities put forward by the working groups included the availability of many lessons learnt to build on, the current momentum in both humanitarian/development communities for CE, the already existing work on developing standards, and the positive examples from the on-going work on Zika and cholera, the Nepal earthquake response, and the Philippines (Haiyan) and Haiti hurricane responses, among others which could help set up optimal standards for CE. In addition to these opportunities, the common fatigue reported by communities on being approached multiple times by many teams on the ground is a challenge that could be turned into an opportunity if CE is an approach that ensures teams on the ground are ready to engage in a coordinated and multi-disciplinary way to respond to multiple community needs.

Working groups stated that, despite the challenges, standards should enable a much stronger advocacy in programming with senior management, and that joint interagency frameworks could also push forward the effective implementation of standards. Recommendations highlighted the importance of taking user-design

perspectives to find common, people-centered actions, practical and focused to keep the process simple while continuing to build on existing frameworks and resources. Several references were made to former WHO Director-General Margaret Chan's observation that "What gets measured, gets done[1]."

The **suggested CE framework** shared with participants prior to the meeting was discussed in plenary session. The vision of the group was to have a simple, ready to apply framework for facilitating a process of identifying and highlights activities, gaps and priority areas for minimum quality standards and their associated measurement. Several suggestions were made to improve the proposed framework to ensure it takes into consideration a wider range of factors in identifying activities and key components of CE so that it would be a more effective tool in facilitating the process of development minimum quality standards and indicators. These included:

- Developing a set of core principles for CE that highlight participatory rights-based values of engaging people for whom programmes are intended for.
- Ensuring the application of clearly defined development and humanitarian lenses.
- Being more deliberate and specific in defining the elements of the program cycle (incl. preparedness, implementation, M&E, resource mobilization) and including a summary of the program cycle descriptions phrased as outcomes.
- Defining the elements of the framework from the community level upwards, including that issues of accountability, self-organization, and vulnerability are taken into consideration.
- Ensuring that dominant theories of community engagement and participation, such as the 'ladder of participation', provide another lens for interrogating or establishing standards.
- Standardizing processes for accurately recognizing and considering local standards, contexts, cultures, and structures.
- Utilizing inter-disciplinary approaches from development, humanitarian practice, social sciences, public health, and demography as well as mixed research methods in the development of CE standards, indicators, and MEL processes.
- Clearly defining all components of any frame (such as the suggested methodological, operational and integration/coordination).
- Ensuring that CE standards and indicators are integrated into policy and programme processes early on and with consistency.
- Studying existing and needed tools [e.g. data collection instruments] and resources [analytical capabilities] available and needed to ensure that the above steps can be taken.

Using the framework as a departure point, participants were also asked to identify the priority community engagement activities (methodological, operational or integration/coordination) for their respective organizations. These were then ranked during a prioritisation exercise that sought to provide a broad indication of what some possible priority areas for standardization might be. A range of priorities were identified, which were categorized as follows:

- Collective responses and coordination early.
- Risk Analysis, needs assessment.
- Agreed and tested steps in CE implementation (for example the community action cycle).
- Data Sharing.

It is interesting to note that these priority areas align broadly to components of the project cycle of preparedness, needs assessment and monitoring/evaluation.

3b. Working Group – what should be the process for development of indicators for CE?

Four working groups were organized around themes such as 1) what a consultative process would look like; 2) who to engage in the consultative process; 3) how to take into account context of the emergency and urgency of the response; 4) what type of conceptual framework would guide the development of indicators; 5) what

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[1] http://www.who.int/dg/speeches/2007/address.to.staff/en/

typologies could be captured by CE indicators; 6) how indicators would improve CE; 7) what resources can we draw upon without reinventing what exists and 8) how to account for data related ethics in the process.

Each group contributed to the themes by serving as peer-reviewers and added to the thinking of the previous group for each of the areas outlined above. As part of the exercise, the groups were asked to separate the process of indicator development from the conceptual and substantive inputs about what to measure in terms of CE. The discussion on typologies or buckets to categorize indicators revolved around areas such as CE outcomes (such as ownership, empowerment for instance) and CE contributing to specific response outcomes (interrupting disease transmission for instance). And a proposal was made to measure CE across local, national and international level in terms of structural aspects of CE response, capacity to engage in CE and behavioural outcomes because of CE.

Another key discussion was about indicators that capture context specific CE over a composite community engagement index that could be relevant across emergencies and contexts. There wasn't a consensus about this however these issues will need to be taken into account as part of the indicator development process. Ethics especially related to consent, confidentiality and data ownership/intellectual property were discussed in depth and the recommendation was to take existing global instruments or legal frameworks (such as the IHR) into account when collecting and reporting on CE data. Another suggestion was to build upon existing resources and develop an indicator bank that can capture the breadth of CE efforts, across contexts and to which different agencies can contribute to and draw from.

DAY 2.

4. Trigger presentation – the development-humanitarian continuum.

The discussion on the Development/Humanitarian nexus and implications for CE started off by Anthony Spalton who spoke of the critical role of communities in building resilience and programming that considers risk assessments as part of routine development programming.

Respondents discussed community engagement practices that are specific to their sectors (Nutrition; Health; Water and Sanitation; Humanitarian Response), with feedback from the wider group provided at the end. A major point made on CE in emergencies in this session was the need to switch to timely and systematic collective approaches at country level as opposed to different agencies going in engaging communities for different response strategies. Usually what is missed is the ability to share information with and collect feedback from communities early enough in the response. Other key points included the importance of prioritizing areas for preparedness to have a smooth continuum between humanitarian and development, as well as shifting to a people-centred approach and plan development programs in a way that responds to what is needed in emergencies. This could help reduce the amount of time that it currently takes in every emergency to figure out who can be activated and how to fill CE information gaps.

Participants stressed the importance of alignment and coordination across agencies to ensure community needs are adequately met. The cross-sectorality of CE was seen as an important entry point to solve communities' issues on the ground from a multi-need based approach rather than sectoral one, as well as working with already existing structures rather than building on new ones.

A debate ensued on providing a stipend to communities in return for their engagement (CE labour) and its sustainability implications. Participants asked if the labour compensation should be a systemic input in any program. Others asked to what extent should that be a part of a systemic service (if community volunteers or mobilizers should be paid for their activities or not), or if this needs to be budgeted from the start by the relevant ministries. The conversation concluded with a recognition for the need of contextual specificity in analysing this issue; The discussion and context of CE labour should be addressed systematically on a context-appropriate basis.

Furthermore, when asked what **success of this initiative** would look like, participants emphasized the importance of an inter-agency effort, fitting CE in both humanitarian and development work, planning for a testing phase prior to expansion, and having a wider consultative approach above all to reach the objectives.

5. Presentation of Working Groups Outputs.

Short presentations were made of the outputs of the working group sessions from Day 1 focused on minimum standards for community engagement and developing standardized indicators. The presentations provided a 'first pass' of inputs and priorities identified during the working groups. Participants were challenged to discuss further improvement and refinement of these outputs and were also asked to make recommendations about the process (including stakeholder consultations and possible outputs) of developing minimum standards/indicators. Participants were asked:

- Who should be engaged during the process, at which stages and what might be the mechanisms for achieving this?
- How should minimum quality standards be presented/ developed? How will they be most effective?
- What aspects of the international development and humanitarian response architecture does community engagement need to be aligned to?
- How might they be monitored?

On **how the process for development of minimum standards and indicators would be most effective**, participants recommended the importance of adhering to a time-bound, transparent, inclusive, and multi-level consultation process that includes testing and validation of standards/indicators after their development. Having few and simple indicators that capture impact on behaviour change as well as community-led responses was mentioned as key. Advocacy for agencies' buy-in should go hand in hand with the process to ensure the standards are relevant, inclusive and measurable.

The proposed stakeholders to be consulted in the process for development of standards/indicators were divided into three main categories according to the participants: (1)- the primary group (community members, volunteers, implementers), and (2)- the secondary group (policy makers/decision makers such as government) and (3) the tertiary group (agencies – global and regional, experts/ academia and researchers, donors, media, private sector, etc.).

Suggestions related to the framework for describing the parameters of community engagement included the need to have it developed in a "results-logic approach" (Theory of Change, process, outcomes) with clear time-sequencing results. In addition, the participants suggested the use of Socio-Ecological model (SEM) and the Results-Based Management (RBM) principles reflected in the final framework.

In terms of the development of indicators, participants though it important to **contextualize the indicators** to various social cultural settings and types of events and different phases of an emergency response was a key recommendation. Participants also emphasized the importance of making a clear distinction between cross-sectoral and sector-specific indicators for ease of use in the future. Participants suggested that a multiple case-based approach to developing and implementing standards and indicators would be productive for testing and validating CE minimum standards and indicators. A case-based approach could prioritize real-time consultation with existing programs across sectors and contexts.

Discussions on the **typology of indicators** resulted in a group consensus to consider the following three main indicator domains as mentioned earlier in the report: (1)- Structural, (2)- Capacity building, and (3)- Behaviour change as a result of CE. It was recommended that indicators such as skills, social capital, collective efficacy, etc. could be included as sub categories.

Regarding **what the indicators should look like**, participants recommended the need for indicators on quality planning & implementation, coordination, accountability, policy/advocacy, community system strengthening, decision making, assessing satisfaction, participation, equity of programs, and sectoral capacity/response.

Participants recommended several **existing indicator resources** that this process could build on. These included SPHERE, Sendai Framework, CHS, IHR, UNICEF's CHW assessment improvement matrix toolkit and Wash/community based approaches, nutrition, humanitarian, polio program indicators (outbreak surveillance data and independent monitoring data), SDGs, Oxfam CE indicators/model framework, Emergency Operation Centre Dashboard (RI/Polio), Voluntary Community Mobilizers (VCM) Social Data info, Save the Children's community capacity strengthening indicators, as well as other indicators by multiple organizations (Core Group, Ebola CoP) among others . All organizations were encouraged to also share their priority list to consolidate and come up with one joint inter-agency list. Validation and testing of these indicators was a common agreement among all.

The last area regarding the development of minimum standards/indicators was **ethics.** There was a clear expressed suggestion and the need to work with an expert group that can review the work done and ensure it reflects well the different organizations who should be included in the development of CE minimum quality standards and indicators for measurement. Applying ethical considerations to feedback mechanisms and ensuring confidential practices emerged as key recommendations. Two main points related to data were raised, one on ensuring data collected from and by communities is shared back with them as a key standard, and the other on the need to decide who should own the collected data and use it. The question of incentives to communities and its link with ethics was very much raised here and requires some more thinking before moving forward with the process.

MAIN RECOMMENDATIONS

In addition to the key suggestions made throughout the different sessions outlined across the report, more specific recommendations were provided by the group, in a last session on **moving forward** as per below*:*

In terms of process:
- Develop a framework for identifying the components and parameters of community engagement that includes a broader range of factors from the development, humanitarian and academic sectors, to ensure an accurate identification of gaps, opportunities and shared priorities.;
- Organize wide] cross-sectoral consultations with more partners on board (including governments, academic institutions frontline organizations, and local communities with experience with CE);
- Be clear on the objectives, scope and outputs of the process. Define if standards, indicators and SOPs should be broader than just for health, and determine for which sectors specifically.
- Build upon already existing guidelines/regulations to ensure that minimum standards are building on the experience and expertise of frontline organizations and those that support them;
- In regards to indicators, limit the number of indicators to a minimum and ensure these are tested, practical and useful;
- Ensure that minimum standards and indicators integrate priority, needed information about local structures, contexts, and cultures;
- Ensure that the process is optimal and efficient by engaging leading organizations and consortia breaking new ground in the field of CE, behavior change communication, and structural/socio-cultural contexts;
- Study and adopt tools and techniques that already exist, rather than "reinvent the wheel;"
- Build upon existing "state-of-the-art" research on CE, behavior change, and integrating sociocultural and structural contexts into development and humanitarian practice;
- Unpack the different CE approaches with regards to short, medium and longer terms results in a rapid response versus long term social norms interventions and developing standards tailored to each;
- Identify 3-4 country contexts to work with communities and their partners within existing systems – consider this while developing and moving on with process;

- Create working groups to follow up on the work, and based them in different organizations to foster collaboration and shared sense of purpose;
- Agree on a secretariat for coordination.

In terms of output:
- The outputs of the consultative process need to be inclusive, completed within a define timeframe (12-18 months) and field tested (as a first draft) and reviewed periodically to update the minimum quality standards and measurement indicators;
- In those outputs, CE minimum standards and indicators end products need to be clearly defined;
- CE minimum standards and indicators end products need to be flexible to respond to changing local contexts;
- CE minimum standards and indicators end products need to be easily adaptable to ensure that they are linguistic, culture, and context-appropriate, as well as transferable across and between contexts;
- CE minimum standards and indicators end products need to be inter-operable with other minimum standards and indicators;
- CE minimum standards and indicators end products need to be actionable across sectors and development and humanitarian contexts;
- CE minimum standards and indicators end products need to be user-friendly;
- CE Indicators need to be informed by S.M.A.R.T. criteria.
- Outputs of the process should include regular communication and strategic coordination with stakeholders by providing consistent updates about process;
- Outputs should include establishing short-term, mid-term, and long-term deliverables
- The final output should include a research package on improving and measuring CE in the short, mid, and long-term evidence generation as part of institutional learning processes
- The final output should include a research package on improving and measuring CE for academic institutions
- The final output should include a research package on improving and measuring CE for policy, strategy, and advocacy;
- An online Hub (accessible to all) is to be created to collect already existing work, SOPs, indicators, etc. and start from there;

In terms of timeframe:
- Agree on what can be done on short term basis, medium terms, and longer-term (18 months' timeframe for indicator development and in the long run, have those CE indicators embedded within data collection systems)

NEXT STEPS

The immediate and medium term next steps are as follows:

1. Develop a roadmap/blueprint with clear timeline, activities and partners to be engaged;
2. Call for participation in technical working groups – one on standards/framework and one on indicators;
3. Form an advisory group to guide the overall process as per the roadmap and to link to external processes.
4. Conduct a rapid review of existing materials, resources, and tools.

A small group of meeting facilitators and UNICEF met on 8 December 2017 to finalize the roadmap. Following will be undertaken over the next 18 months. Literature review of standards and indicators, formation of technical working groups and advisory groups and drafting of a framework for standards and indicators by April 2018. Followed by, an inter-agency consultative process for field testing the outputs through virtual, in-country and regional consultations by September 2018. Final draft of the CE standards and indicators for dissemination available by December 2018 followed by a dissemination and uptake process till June 2019. Another in-person meeting will be convened by July or September 2018.

We look forward to reaching out to you and your respective agencies shortly with the invitation to participate in this process.