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ACCOUNTABILITY IN DISPLACEMENT CONTEXTS

A case study on client-responsiveness in collaboration with IRC Tanzania



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RECAP is a four-year research project focusing on the health and protection sectors in humanitarian response. It conducts research and strengthens research capacity to help improve decision-making and accountability in response to humanitarian crises. It is a partnership between universities in the United Kingdom, Sierra Leone and Lebanon, along with leading humanitarian NGOs, including Save the Children. RECAP is funded by the Global Challenges Research Fund (GCRF).

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Cover photo: An aerial shot of Mtendeli refugee camp in western Tanzania. © UNHCR/Georgina Goodwin

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LIST OF ABBREVIATIONS

ΑΑΡ	Accountability to affected populations		
CFS	Child Friendly Space		
CHS Core Humanitarian Standard on Quality and Accountability			
CIDA	Canadian International Development Agency		
CRRF	Comprehensive Refugee Response Framework		
CYPD	Child & Youth Protection and Development		
FGD	Focus Group Discussion		
GCRF	Global Challenges Research Fund		
IASP2	International Association for Public Participation		
IRC	the International Rescue Committee		
MEAL	Monitoring, Evaluation, Accountability and Learning		
PRoL	Protection and Rule of Law		
RECAP	Research capacity strengthening and knowledge generation to support preparedness and response to humanitarian crises and epidemics		
RLI	Refugee Law Initiative		
SGBV	Sexual and gender based violence		
UNHCR	United Nations High Commissioner for Refugees		
WPE	Women's Protection and Empowerment		

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EXECUTIVE SUMMARY

INTRODUCTION AND AIM OF THE STUDY

In line with recent initiatives such as the Core Humanitarian Standards on Quality and Accountability (CHS) and the Grand Bargain Participation Revolution, the International Rescue Committee (IRC) has committed to making humanitarian programming more accountable to the communities it serves. In order to do this, the IRC developed, piloted and is implementing its Client Responsive Programming Framework. As part of the framework, the IRC commits to systematically and regularly collect, interpret and use client feedback. Client responsiveness also requires that staff communicate and explain to clients how their feedback has informed and shaped programming decisions and activities.

This evaluation is part of a broader research collaboration between the Refugee Law Initiative (School of Advanced Study, University of London) and the IRC. The study investigates:

- How IRC Tanzania employs client responsiveness in its operations and programming;
- How a client-responsive approach is used to foster meaningful participation of and feedback to clients;
- How the IRC can influence staff culture to foster greater receptivity to client responsiveness.

IRC Tanzania country programme was selected as a case study because that office has been applying client responsiveness in the implementation of its programming, and consistently using client responsiveness tools and resources. The sectors covered in this study are: Child & Youth Protection and Development (CYPD), Education, Health, Protection and Rule of Law (PRoL), and Women Protection and Empowerment (WPE).

The study uses a mixed-method approach which includes: desk-based research of IRC policies and guidelines; remote interviews and an online survey with IRC Tanzania staff at different levels of seniority; analysis of Focus Groups Discussions (FGDs) administered by IRC staff in April 2021; and the IRC multisectoral survey with clients administered by IRC-hired enumerators in September 2020. FGDs and survey data were shared by IRC Tanzania with the research team for analysis (for further details see section 2).

While the evaluation focuses on IRC Tanzania client-responsive programming, key findings and recommendations are relevant for other IRC country programmes and humanitarian organisations more broadly. The report identifies challenges and opportunities in implementing a client-responsive approach and informs practices to strengthen accountability to affected populations (AAP).

KEY FINDINGS AND LESSONS

APPLYING CLIENT RESPONSIVENESS: FROM POLICY TO PRACTICE

This evaluation shows that the IRC has developed and is implementing policies that aim to achieve global humanitarian accountability standards. In line with CHS Commitments 4 (*Humanitarian response is based on communication, participation and feedback*) and 5 (*Complaints are welcomed and addressed*), IRC Tanzania set up feedback mechanisms that can be used by clients to provide feedback on programming throughout the project lifecycle.

At IRC Tanzania, feedback can be provided through proactive channels, such as client satisfaction surveys and FGDs, and through reactive channel, such as suggestion boxes, hotlines and office walk-ins. There are also open feedback channels based on less structured and more informal interactions between IRC staff and clients. The variety of channels allows clients to use the ones they are more comfortable with or that are more accessible to them. While the feedback channel preference varied across different age groups (see section 3.3), the results of the survey show that office walk-ins are the preferred feedback channel for 63.1% of the respondents, followed by feedback through IRC staff (42.8%), toll-free hotline (27.9%), and suggestion box (24.1%). These are also the most frequently used feedback channels; the majority of clients surveyed who used feedback channels did so through office walk-ins (47.6%) and IRC staff (27.6%), indicating that face-to-face communication is preferred by clients.

All sectors considered in the IRC Tanzania country office apply client responsiveness in their operations and programming. Each team has a client responsiveness focal point who is responsible for recording client feedback on an online data management with integrated dashboard. The dashboard contains feedback and client details which are key to monitor the progress of feedback resolution. The dashboard is also used by MEAL and senior members of staff to analyse data and identify trends that are then used to inform programmatic decisions (see section 3.1).

EFFECTIVENESS OF FEEDBACK MECHANISMS

For a client-responsive approach to be effective, affected populations must be aware of the feedback mechanisms and their purposes, and channels must be accessible to everyone.

The client satisfaction survey (conducted in September 2020) revealed that only 54.5% of respondents were aware of the feedback mechanisms. Staff interviews also revealed that sometimes feedback mechanisms are not used appropriately by clients (e.g. clients calling the hotline to check if staff pick up). This indicates that information on how to use feedback channels may not be clear. Low levels of awareness of feedback mechanisms can hamper humanitarian organisations' ability to implement AAP. Greater knowledge of the workings and purpose of feedback channels can improve the quality of feedback submitted (for further details on clients' use of feedback channels see 3.3).

While toll free hotlines are useful especially for those who struggle to provide feedback in-person and those with mobility issues, in Tanzania access to hotlines can be more limited as refugees struggle to register SIM cards due to government regulations. To address this, PRoL consulted with people with disabilities and marginalised groups more broadly to identify the most appropriate feedback channels for them. Following client feedback, IRC Tanzania is currently implementing their suggestions, which include holding more regular FGD sessions in different zones of refugee camps to afford everyone the opportunity to provide feedback and discuss their concerns (see section 3.3).

Staff generally agreed that in order to maintain clients' trust, the feedback loop must be closed. Of the surveyed clients who used the feedback channels and did receive a response, 96.8% were satisfied. However, only 83.2% of surveyed clients who provided feedback received a response; nearly one every five clients may not get a response. Clients who did not get a response or received a delayed response indicated that they felt that their opinions are not valued and that providing feedback may be useless. Even if humanitarian organisations are unable to satisfy clients' suggestions, staff must close the feedback loop by explaining to clients what is achievable within the organisation budget and remit, or when they will be able to implement their suggestions. In order to enhance accountability towards affected populations, humanitarian organisations should also endeavour to explain how programmatic decisions were made after client feedback was provided (for further details see sections 3.5 and 4.2.2).

Recording feedback is a key element for the effectiveness of a client-responsive approach and to ensure the feedback loop is closed. Findings from client and staff surveys suggested that IRC Tanzania experienced some issues with this aspect of client responsiveness partly due to staff's difficulties in prioritising tasks, and technical issues with transferring data from paper log-books to the online system. With the support of senior members of staff, some focal points have identified strategies to ensure feedback is recorded and is not lost. To ensure feedback is safely stored online, IRC Tanzania recently implemented the use of CommCare, a mobile platform that supports frontline workers in data collection and recording, and can reduce errors in data management and analysis (for more information, see section 4.2.3, and 3.1).

IRC PROGRAMMING AND CLIENTS' SATISFACTION

The 2020 client satisfaction survey helped assess how IRC Tanzania sectors perform in relation to relevance, quality, access and impact of programming, and if clients feel their feedback is considered. The average satisfaction rates of clients surveyed on the quality of programming was above 80%. The WPE program had the highest overall satisfaction rate at 96.7%, and CYPD had the lowest satisfaction rate of 84.4%. Younger groups were more satisfied than older groups overall (especially those aged 60+). People with a disability were generally less satisfied than people without a disability. Some clients indicated that they had never received assistance or adequate information on service delivery or referenced potential 'favouritism' in service delivery across different sectors (for more details on the survey, see 4.1).

Comparing satisfaction levels from the 2019 and 2020 client surveys suggests that implementing the Client Responsiveness Programming Framework, tools and resources may be one of the factors that improve clients' level of satisfaction. In 2019, 66% of clients surveyed were satisfied with IRC services, which increased to over 80% in 2020 (see section 4.1). In interviews, staff explained that the approach to incorporating client feedback from 2019 in programmatic decisions greatly contributed to the increase of relevance and effectiveness of aid.

CLIENT PARTICIPATION AND ABILITY TO INFLUENCE IRC PROGRAMMING

Staff surveyed and interviewed generally agreed that incorporating client feedback in programmatic decisions makes programming more relevant and effective. However, while staff interviewed discussed examples of how different sectors have used client feedback to change programming, the anonymous staff survey indicated that adaptations following client feedback are not made consistently or frequently (see section 3.4). Findings from staff survey and interviews suggest that IRC Tanzania programmes generally tended towards the 'consultation' step of the IAP2 Spectrum of Public Participation (see section 2.3). This means that feedback is collected from clients, and then analysed and acted upon by IRC staff, and that communities are very marginally involved in decision-making over programming.

The Education sector provides an example of how more decision-making power can be put in the hands of clients as teachers, parents and community representatives contribute to and implement 60% of the programme (see section 4.4). Activities that enhance greater participation in decision making can improve the relevance of humanitarian response. As suggested by staff members, this could be done using existing engagement opportunities to share more information on decision-making and plan for current and future programming.

STAFF CULTURE AND RECEPTIVITY TO CLIENT RESPONSIVENESS

Findings indicate that staff interviewed and surveyed generally valued clients' opinions and agreed that programme quality improves with the use of client feedback.

However, sometimes client responsiveness is not seen as a work priority for staff. Data from the interviews shows that staff, including focal points, may sometimes perceive client responsiveness as an 'add-on' and not core to everyday roles and responsibilities. Increased management support alongside enhanced HR practices in relation to recruitment, including induction sessions, and performance appraisal, can clarify roles and responsibilities, and help staff understand that client responsiveness is an integral part of everyone's job (see sections 4.3, 5.1 and 5.2).

Currently, client responsiveness training is not mandatory to all members of staff. Through the survey, field officers, in particular, indicated that they would appreciate training on how to collect feedback, engage clients, close the feedback loop and manage clients' expectations. Training on client responsiveness and AAP could enhance greater awareness of feedback mechanisms and its workings, and improve humanitarian organisations performance in collecting, recording, using and responding to client feedback (see section 5.1 and 5.2).

HAS IRC TANZANIA ACHIEVED INTERNATIONAL AAP STANDARDS? PROGRESS AND CHALLENGES REMAINING

IRC Tanzania shares information with affected populations, has set up complaint-handling processes and accessible feedback mechanisms, and has paved the way for the creation of an organisational culture which welcomes feedback and complaints. While greater clients' participation in decision-making must be encouraged, IRC Tanzania is making good progress towards the realisation of CHS commitments 4 and 5.

There remain, nonetheless, some difficulties that are experienced generally by humanitarian organisations in the implementation of AAP. The lack of financial and human resources can seriously affect staff's workload and the application of client responsiveness from the ability to collect and adequately record feedback, to the incorporation of analysed feedback into programming.

A key challenge is that if feedback is collected but not responded to, recorded or incorporated into programming, trust in humanitarian organisations' ability to address clients' needs is compromised. This can lead to feedback fatigue among clients, and hence affect trust and quality of relationship with the affected population. Further training, the inclusion of client responsiveness in recruitment, senior staff support, and performance appraisal practices and induction and orientation sessions on AAP, could increase staff awareness and encourage them to adapt their working practices.

A main challenge in applying a client-responsive approach is managing clients' expectations, particularly when programming cannot follow clients' suggestions because of lack of resources or limitations due to the contexts in which humanitarian organisations operate. Sometimes it is feasible to fundraise to adapt programming following client feedback; however, in some instances national policy may limit the IRC's ability to respond to clients' feedback (see section 4.3).

While working in a multi-agency context can help satisfy clients' needs and priorities particularly when outside the IRC's remit, IRC staff suggested that inter-agency working groups and referral pathways could be more effective. In a multiagency context, improvement of referral and inter-agency systems is needed to address communities' needs and the achievement of CHS Commitment 6, which calls for a more coordinated and complementary humanitarian response (see sections 3.2 and 4.6).

RECOMMENDATIONS

FOR THE IRC AND HUMANITARIAN ORGANISATIONS

In order to enhance AAP and strengthen client participation in decision-making, some priorities have been identified:

- Conduct regular awareness raising activities of feedback mechanisms among clients by developing additional sensitisation materials and/or incorporating this in the project materials, where possible. Material produced should clarify what feedback is and how it can be provided;
- → Develop mechanisms to move from consultations to involvement of clients in decision-making. Existing mechanisms of engagements can be used. Rather than conducting FGD or listening sessions to simply extract information, use these occasions to discuss options on programme changes and adaptation. With time, these groups may be able to become working groups that advise the IRC and humanitarian organisations on changes and design for existing and future programming;
- Prioritise the inclusion of people with disability and marginalised groups by setting up more regular meetings/FGDs/working groups in different zones of refugee camps;

- → Set up mobile helpdesks which can increase the opportunities for people with mobility issues to provide feedback individually. This is particularly important when dealing with sensitive feedback and when clients without phone access wish to communicate directly with IRC staff without having to go through community leaders or incentive workers;
- → Enhance information provision to tackle difficulty in accessing services and clients' perception of biased service delivery. Use different channels (e.g. community dialogues, community leaders) to increase communication on service delivery;

TO FOSTER GREATER RECEPTIVITY TO CLIENT RESPONSIVENESS AMONG STAFF

Ensuring that feedback is collected, duly recorded, analysed and used is fundamental for a clientresponsive programming, but the conditions that allow staff to action it must be created and nurtured:

- Better define roles and responsibilities in relation to client responsiveness so that collecting and recording feedback is not perceived as an 'add-on' but as part of everyone's core responsibilities. Include client-responsive tasks (such as recording feedback or valuing clients' opinions) and skills (e.g. listening, empathy) in job descriptions and in the definitions of performance targets;
- Managers should continue supporting staff in technical aspects related to client responsiveness such as collecting, recording and responding to client feedback;
- Develop training in customer care skills that could support all staff in communicating with clients, managing their expectations and handling negative feedback, and consider extending client responsiveness training to all staff that are in touch with clients in their daily activities (e.g. field officers);
- Consider implementing rotation opportunities so that staff are exposed to different roles (e.g. recording feedback) and tasks involved in handling and using feedback.

1. INTRODUCTION

1.1 ACCOUNTABILITY TO AFFECTED POPULATIONS AND THE INTERNATIONAL RESCUE COMMITTEE'S STRATEGY

Accountability to Affected Population (AAP) and participation of displaced persons in aid delivery decisions has been a subject of increased attention over the past two decades.¹ Humanitarian actors have recognised that involving people affected by crisis in decision-making can improve the effectiveness, relevance, and quality of humanitarian response.²

Many international initiatives, such as the Core Humanitarian Standards on Quality and Accountability (CHS) (2014) and the Grand Bargain Participation Revolution (2016), promote the need to put affected populations at the centre of humanitarian responses. Two of the nine CHS commitments – Commitment 4 (Humanitarian response is based on communication, participation and feedback) and Commitment 5 (Complaints are welcomed and addressed) – stress the importance

References to AAP include, but are not limited to: Davis, A. (2007). Concerning accountability of humanitarian action. HPN Network Paper No. 58. London: Overseas Development Institute; Tan, Y.S.A. & von Schreeb, J. (2015). Humanitarian Assistance and Accountability: What Are We Really Talking About?. Prehospital and Disaster Medicine, 30(3), 264-270; and Daun, J. (2020). Humanitarian accountability: a conceptual analysis. RLI Working Paper No. 41, London: Refugee Law Initiative, available at https://sas-space.sas.ac.uk/9316/. On the crucial role of feedback mechanisms, see, among others, Jacobs, A. (2010). Creating the missing feedback loop, IDS Bulletin, 41, 56-64, available at https://bit.ly/30plFGj; Anderson, M., Brown, D. & Jean, I. (2012). *Time to listen: Hearing people on* the receiving end of international aid. CDA Collaborative Learning Projects. Cambridge: CDA Collaborative, available at https://bit.ly/3pBZji8; Bonino, F. with Jean, I. & Knox Clarke, P. (2014). Humanitarian feedback mechanisms: research, evidence and guidance, ALNAP Study, London: ALNAP/ODI. On the relevance of humanitarian response, see Swithern, S. (2019). More Relevant? 10 ways to approach what people really need. Background paper. ALNAP 32nd Annual Meeting. London: ALNAP, available at https://bit.ly/3kY3EJI.

² Among others Lippert, R. (1999). Governing Refugees: The Relevance of Governmentality to Understanding the International Refugee Regime. *Alternatives: Global, Local, Political,* 24(3), 295–328; Hilhorst, D. (2002). Being good at doing good? Quality and accountability of humanitarian NGOs. *Disasters,* 26(3), 193-212; Van Rooyen, M. (2013). Effective Aid: Ensuring Accountability in Humanitarian Assistance. *Harvard International Review,* 35(2), 12-16; Olivius, E. (2014). Displacing Equality? Women's Participation and Humanitarian Aid Effectiveness in Refugee Camps. *Refugee Survey Quarterly,* 33(3), 93-117.

of AAP. Similarly, the Grand Bargain Participation Revolution called for humanitarian organisations to increase engagement with displaced communities through processes which enhance their ability to influence programming. These include appropriate and effective feedback and complaint mechanisms and donors' adoption of more flexible funding schemes that would allow humanitarian organisations to adapt programming based on affected populations' feedback.

The International Rescue Committee (IRC) responded to these calls by developing and implementing its 2015-2020 Strategy,³ which aims to make IRC programming more responsive to the needs, priorities and aspirations of its clients.⁴ Key for the realisation of the strategy was the development, testing and implementation of the Client Responsive Programming Framework.⁵ In line with the Framework, the IRC started to systematically, deliberately and regularly collect, analyse and respond to client feedback, and to use client views and opinions to adapt programming at different phases of the programme cycle.⁶ The IRC also pledged to close the feedback loop with clients by explaining how their feedback and input informed programmatic adaptations.7

1.2 AIMS AND OBJECTIVES OF THE STUDY

Following an increased interest in and commitment to AAP, the Refugee Law Initiative (School of Advanced Study, University of London), in collaboration with the IRC and the Tanzania country programme, set out to evaluate the state of implementation of IRC's Client Responsive Programming Framework.

The aim of the evaluation is to investigate:

• How the IRC employs client responsiveness in its operations and programming

- a) How does the country office apply the Client Responsive Programming Framework? How does that differ for different sectors within the country office? What client responsiveness tools and resources developed by the IRC do staff presently use?
- b) What challenges and opportunities arise in implementing a client responsiveness approach?
- c) What challenges and opportunities arise in implementing client responsiveness in a multi-agency setting?

³ IRC. (2015). IRC Strategy 2015-2020. Executive Summary, January 2015.

⁴ The IRC uses the term 'client' because it believes that the people it serves 'have a right and the power to decide what kind of aid and services they need and want.' The term 'beneficiary' would have a more passive connotation as it implies that people receive aid and services, but cannot choose or influence programming. The IRC avoids the use of the term 'beneficiary' also because the term would assume that people necessarily benefit from aid received without considering people's opinions on the quality, effectiveness or relevance of humanitarian programming. Only 'clients' can assess if they have benefitted from aid or not. See IRC (Undated) *Client responsiveness: introduction and FAQ*, IRC, available at https://bit.ly/3vahUEb.

⁵ Client Responsive Programming Framework refers to measures to collect, analyse and respond to affected people's feedback and complaints, and supports their participation and engagement in project activities and decision-making processes. The term encompasses similar concepts and approaches used by organisations such as Accountability to Affected Populations (AAP) or Community Engagement and Accountability (CEA). IRC. (2018). *Client-Responsive programming framework: IRC's approach to accountable programming.* IRC, 30 April 2018, available at https://bit.ly/3GiTUDu.

⁶ IRC. (2018). *Client-Responsive Programming Framework. IRC's approach to accountable programming;* IRC. (2019). *Client Responsiveness Measurement Framework.* IRC, March 2019; IRC. (Undated). *Client responsiveness: introduction and FAQ.* IRC, available at https://bit.ly/3vahUEb.

⁷ Ibid.

How the client responsiveness approach is used to foster meaningful participation of and feedback from clients

- a) How do clients use the formal and informal feedback mechanisms? What limitations and opportunities do these mechanisms present? To what extent are clients' views included in the selection of feedback mechanisms?
- b) What approaches have IRC staff adopted to 'close the feedback loop'? What potential is there to develop this area of client responsiveness?
- c) To what extent do clients feel they have influence over IRC decision-making, and what factors influence this perception?

• How the IRC can influence staff culture to foster greater receptivity to client responsiveness

- a) Do staff believe that program quality, agility and business development improve with the use of feedback and response mechanisms? Do staff perceive any negative implications of using the client responsiveness approach? What kind of impact of using client responsiveness do staff see in their work?
- b) How does the adoption of client responsive recruitment, learning and development, and performance management influence staff behaviours towards the collection and use of client feedback?
- c) What incentives for staff contribute to a more effective use of client feedback in programmatic decision making? What enables/disenable them to use clients' feedback?

After providing some background information on the Tanzania case study, the chapters which follow will discuss the research and evaluation methodology and present the findings. The report will highlight good practices that could be adopted by other IRC country programmes and other humanitarian organisations.

1.3 STUDY CONTEXT: REFUGEE AND ASYLUM SEEKER RIGHTS IN TANZANIA

According to the United Nations High Commissioner for Refugees (UNHCR), Tanzania hosts 253,040 persons of concern, of which 225,252 (about 89%) are refugees and 27,788 (11%) are asylum seekers.⁸ The majority of the refugees come from Burundi (173,453, 68.5% of the total refugee population), followed by refugees from the Democratic Republic of Congo (79,141, 31.3% of the total refugee population). In 2014, about 3,000 Somali refugees and 162,156 Burundian refugees acquired Tanzanian Citizenship, a naturalisation effort that was praised by the international community and the UNHCR.⁹

Such progressive policies reflect the country's historically welcoming stance towards refugees. This was largely motivated by President Julius Nyerere's commitment to pan-African ideals and conviction that refugees' presence could attract aid to develop remote and less populated areas of the country.¹⁰ Since the 1960s, when the first refugees came from Rwanda, displaced people in Tanzania have been given land to farm and were partially integrated in local economies.¹¹ Rural refugee settlements and access to land were instrumental in achieving successful agricultural production and trade, which benefitted both the country's economy and refugees' self-reliance.¹²

⁸ UNHCR. (2021) Tanzania Refugee Population Update. UNHCR, June 2021, available at <u>https://bit.ly/3dumLrW</u>.

⁹ Some 32,000 Rwandan refugees also acquired Tanzanian citizenship in 1982. See Marcus, F. (2014). Tanzania grants citizenship to 162,000 Burundian refugees in historic decision. UNHCR, 17 October 2014, available at <u>https://bit.ly/32W0qQi</u>.

¹⁰ Kuch, A. (2016). Naturalisation of Burundian refugees in Tanzania. *Forced Migration Review*, 52, 63-65.

¹¹ *Ibid.*

¹² *Ibid.*

In 2016, Tanzania volunteered to pilot the Comprehensive Refugee Response Framework (CRRF), an international comprehensive response to displacement that promotes refugees' selfreliance. However, in 2018, the government changed its position and withdrew from the piloting.¹³

Currently, Tanzania's national policy towards refugees promotes return to their country of origin. The majority of refugees in Tanzania now live in the Nyarugusu, Mtendeli and Nduta refugee camps in the Kigoma region, located in the northwestern part of the country. As the government prioritises repatriation over naturalisation or integration, refugees can cultivate plots of land, but are not permitted to engage in incomegenerating activities. As a result, they rely heavily on humanitarian assistance, coordinated by the UNHCR and provided by various humanitarian organisations, including the IRC. Such strong dependence on humanitarian assistance is particularly problematic as funding does not always cover refugees' basic needs.14

1.4 IRC TANZANIA AS A CASE STUDY

The IRC Tanzania country programme has been selected as the case study because since 2019 it has been applying the Client Responsive Programme Framework, tools, and resources to implement programming that is responsive to the needs, priorities, and aspirations of affected populations.

The IRC began its operations in Kigoma region, the northwest part of Tanzania, in 1993 following the arrivals of refugees from Rwanda and Burundi, and later on from the Democratic Republic of the Congo. The IRC currently assists refugees in Nyarugusu, Nduta and Mtendeli refugee camps, as well as host communities. According to IRC Tanzania 2020 strategy, the priorities for the country programme are Child & Youth Protection and Development (CYPD); Women's Protection and Empowerment (WPE); Education; Health; and Protection and Rule of Law (PRoL).¹⁵ These sectors are considered in the present evaluation.

¹³ Rudolf, M. (2019). Share the burden or pass it on?. *International Migration*, 57(6), 208-223.

¹⁴ In 2018, for instance, Tanzania humanitarian response received only 27% of the funds needed to assist its refugee population. Among others, see Romveit, G. (2019). 6 things to know about refugees in Tanzania. *Norwegian Refugee Council*, 6 March 2019, available at https://bit.ly/318MiNs.

¹⁵ IRC. (2019). *Tanzania: Strategy Action Plan*, December 2019, at <u>https://bit.ly/3pBMzrl</u>.

2. METHODOLOGY

2.1 DATA COLLECTION

Data collection took place between November 2020 and May 2021. Due to the COVID-19 pandemic, fieldwork in Tanzania was not possible. The study, therefore, relies on a mixed-method approach which includes:

- Desk-based research on IRC policies and guidelines, as well as academic and policy sources on AAP;
- Remote semi-structured interviews with IRC Tanzania staff members in different roles and across different sectors who work on or with client responsiveness tools;
- An online questionnaire with IRC Tanzania staff members in different roles and across different sectors;
- Analysis of secondary sources and, more specifically, qualitative data from Focus Group Discussions (FGDs) with clients and quantitative data from the IRC 2020 multisectoral client satisfaction survey. FGDs and the IRC survey were conducted by IRC staff and IRC-hired enumerators as part of the country programme internal evaluations. Data was shared by IRC Tanzania for analysis by the research team.

Thirty members of staff, out of a total of 191,¹⁶ responded to the online survey which captured anonymously quantitative feedback on staff perceptions of client responsiveness and its effectiveness. The survey was followed by 13 semi-structured interviews, which helped to triangulate the survey responses and to extract more qualitative information on how staff employ client responsiveness. Both the interviews and the survey were conducted in English and the researcher obtained signed informed consent from participants. Staff could choose whether to remain anonymous and whether to be audio-recorded.

Client views were captured through 21 FGDs conducted by IRC staff in April 2021 as part of

¹⁶ As of 2018, the number of IRC Tanzania staff was 191, with 184 national staff and 7 international staff. IRC. (2018). *The IRC's work in Tanzania,* unpublished document.

quarterly internal programme evaluations. Each FGDs included 7 to 20 participants.¹⁷ A total of 281 clients took part in the FGDs, which were conducted separately with male (133) and female (147) participants. IRC Tanzania shared anonymised details on the following conversations:

- Six FGDs for CYPD, which included both adolescent and adult participants;
- Two FGDs with primary teachers for the Education programme;
- Three FGDs for Health;
- Two FGDs for PRoL;
- Eight FGDs for WPE, of which three with adolescent girls and boys, and five with adults.

A total of 3,298 clients (2,219 female and 1,076 men) took part in the 2020 IRC multisectoral annual survey, which captured clients' views and levels of satisfaction with IRC programmes and services. The assessment was conducted in Swahili and Kirundi through a survey administered by IRC-hired enumerators across Nyarugusu, Nduta and Mtendeli refugee camps in the Kigoma region. Respondents were selected in different ways for the five sectors, with all cases involving random selection as far as allowed by sampling constraints. The survey included questions about the relevance, quality, respectful and friendly behaviour of IRC staff, ease of access to services, safety receiving services, impact of services, how much clients' voice is taken into consideration in IRC programming, and feedback channels (IRC Core Feedback Themes). The survey provided quantitative data on the level of satisfaction as well as qualitative information when clients explained the reasons for being dissatisfied with the services.18

To protect participants' identity and confidentiality, the RLI received anonymised clients' responses from FGDs and the survey. IRC staff and enumerators involved in data collection obtained informed consent from clients before they took part in FGDs and the survey.

2.2 DATA ANALYSIS

Interviews with IRC staff, FGDs with clients and qualitative responses to the IRC annual survey with clients and staff survey were analysed using NVivo, a qualitative data analysis software. The software helps identify specific codes and themes related to the research questions. Deductive coding derived from the research questions included: 'relevance'; 'client responsiveness opportunities', 'client responsiveness challenges', 'closing the feedback loop'. Inductive coding, using an open approach to the data, included: 'client's wish to participate in decision-making', 'client's perception of bias in service delivery', 'livelihood opportunities' and 'trust'.

The survey with staff was administered and analysed through a cloud-based software that captured responses in real time. The data was limited to respondents who completed the survey (30 staff) and excluded those who started the survey but did not complete it (12). Data was disaggregated according to age, gender, role, sector, years of employment and national/ international staff.

The client survey was analysed with SPSS, a software for statistical analysis. Data disaggregation according to gender, age, location and disability status helped to identify strong areas of IRC programming and some areas of concerns. Only when clients responded that they were 'satisfied' or 'very satisfied' (numerical values 4 and 5), did the analysis consider the satisfaction criteria met. When clients were not fully satisfied with the service, they had the opportunity to expand on their answers. NVivo was used to capture qualitative trends in the narrative on the level of satisfaction and clients' suggestions on how to improve the services.

¹⁷ IRC Tanzania conducts quarterly FGDs with their clients using a standard FGD guide to capture clients' views on accessibility, relevance, impact and quality of activities, services and information provided by the IRC.

¹⁸ Criteria were not considered met when clients responded that their level of satisfaction was average, low, or very low.



O Food in the market in Nduta refugee camp. © UNHCR/Benjamin Loyseau

2.3 GUIDING FRAMEWORKS FOR ANALYSIS

To address the research questions and to assess the extent to which IRC Tanzania and IRC Client Responsiveness Programme Framework meet the humanitarian sector standards on AAP, frameworks of analysis included the CHS Commitments¹⁹ and the IAP2 Spectrum of Public Participation.²⁰

CHS Commitment 4 (*Humanitarian response is based on communication, participation and feedback*) is achieved when 'Communities and people affected by crisis know their rights and entitlements, have access to information and

participate in decisions that affect them.²¹ In the context of this evaluation, the organisational responsibilities include: clear policies for information-sharing in place; the promotion of a culture of open communication; and policies and strategies to engage affected populations.

CHS Commitment 5 (*Complaints are welcomed and addressed*) is achieved when 'Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.'²² The organisational responsibilities include: a complaints-handling process in place; an organisational culture in which feedback and complaints are welcome and taken seriously; a situation in which communities served are fully aware of what to expect from humanitarian staff.

¹⁹ CHS Alliance, Group URD & the Sphere Project. (2014). Core Humanitarian Standard on Quality and Accountability, CHS Alliance, Group URD and the Sphere Project, available at https://bit.ly/31Alqx9.

A useful framework for assessing the level of client participation employed by IRC Tanzania is through the IAP2 Spectrum of Public Participation. This assesses the level of public participation which ranges from information sharing, on the one hand, right through to clients being involved in decision-making and empowered to deliver programming themselves on the other. IAP2's Spectrum of Public Participation, available at https://bit.ly/3v7TjQg.

²¹ CHS Alliance, Group URD and the Sphere Project. (2014). Core Humanitarian Standard on Quality and Accountability, p. 13.

²² *Ibid.*, p. 14.

Table 1: Adaptation of the original IAP2 Spectrum

INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
To inform communities served about services, problems, and solutions.	To consult with communities served about their needs and how these can be addressed. Organisations also commit to share with communities served information on how their input influenced decisions.	To work directly with communities served to ensure their needs and priorities are understood, considered, and addressed. Organisations endeavour to inform communities on how their input has influenced decisions.	To partner with the communities served in each aspect of the decision to develop suitable and preferred solutions. Communities advise on programming, and suggestions are incorporated to the maximum extent possible.	The final decisions on programming and services are in the hands of the communities. Organisations serving them commit to implement what communities decide.

INCREASING COMMUNITIES' ABILITY TO INFLUENCE PROGRAMMING

CHS Commitment 6 (*Humanitarian response is coordinated and complementary*) is achieved when 'Communities and people affected by crisis receive coordinated, complementary assistance.'²³ While IRC Tanzania is not the solely responsible for the realisation of this commitment given its collaborative nature, organisational responsibilities include the development and implementation of policies and strategies in place that show a clear commitment to coordination of and collaboration for humanitarian response.

The IAP2 Spectrum of Public Participation describes different levels of participation ranging from sharing information to clients and communities being empowered. As the IRC committed to increasing clients' ability to influence programming, the spectrum of public participation is useful to understand how much clients are able to participate in decisions affecting their lives across different sectors (see Table 1 adapted from the original IAP2 Spectrum).

2.4 ETHICS REVIEW

This research has been approved by the Ethics Review Board of the School of Advanced Study (University of London) and by the Institutional Review Board of the IRC. Data has been collected and managed in line with the University of London's Research Ethics Guidance, and the Collaboration Agreement between the RLI and the IRC.

²³ *Ibid.*, p. 15.

2.5 STRENGTHS AND LIMITATIONS

The research was limited due COVID-19 restrictions on travelling and on face-to-face encounters. The study was reorganised to use remote data collection methods (remote interviews and online questionnaire) and the analysis of secondary sources (clients' responses in FGDs and the survey administered by IRC staff and IRC-hired enumerators). While remote engagement allowed the research to continue, it also presents a series of limitations. It does not offer researchers the chance to be in places researched, which limits observations and informal encounters that can enrich the research process and help further contextualise the data and analysis.

Reliance on secondary data from FGDs and the client survey, implemented with direct IRC oversight, is another limitation. Data was collected by IRC staff or IRC-hired enumerators, so some of the answers may be biased by the presence of humanitarian personnel. For example, while some clients were not afraid of sharing negative feedback, others may have altered their responses for fear of losing aid and access to services. Independent data collectors and researchers may have limited the potential bias in clients' answers. Similarly, staff who self-selected to complete the staff survey may have more interest in the research and may be more committed to AAP agendas. Their responses and perceptions of client responsiveness may be more positive than the overall staff perception.

Even with these limitations, the evaluation highlights the challenges and opportunities of a client-responsive approach, areas for improvement, and best practices that the IRC and other humanitarian organisation can focus on to ensure humanitarian responses are more relevant, impactful and effective in the future.

3. IRC TANZANIA'S APPLICATION OF CLIENT RESPONSIVENESS

This chapter explores how IRC Tanzania employs the Client Responsive Programming Framework. It discusses the multi-agency context in relation to client responsiveness and the different components of AAP: the setting up of feedback and complaint mechanisms, the recording of client feedback, responding to client feedback and closing the feedback loop, and the incorporation of client feedback into programming. In discussing the main components of client responsiveness, the chapter assesses clients' awareness and use of feedback mechanisms which are key for a client-responsive approach. It also includes tips and highlights good practices adopted by IRC Tanzania to improve the management of feedback data, create more inclusive feedback systems, and use client feedback to improve the relevance and quality of humanitarian assistance.

3.1 HOW DOES CLIENT RESPONSIVENESS WORK?

At the IRC, programming is considered clientresponsive when client feedback is systematically collected, analysed and used to inform decisionmaking.²⁴ Client responsiveness also includes maintaining communication with clients to inform them of services and explain how their feedback has been incorporated in programmatic decisions and activities.²⁵ Informed by the IAP2 Spectrum of Public Participation, the IRC commits to:

- Share information with clients about its programming and feedback and complaint mechanisms available;
- Consult clients on their needs;
- Increase the ways in which clients can influence IRC programmatic decisions so that assistance is relevant and effective.

Information on programming across the CYPD, Education, Health, PRoL and WPE sectors is provided through collective channels, such as community dialogues, through one-to-one meetings with clients, outreach activities, or through community leaders and incentive workers.²⁶ Since not all clients are able to attend community dialogues, the IRC also shares information collectively by using loudspeakers attached to a car which drives through the refugee camp. Music is often used to attract people's attention before staff share relevant information and stop to collect any feedback or respond to clients' queries.²⁷

25 Ibid.

²⁷ Interview with a Protection Officer.

²⁴ IRC guidelines shared by the IRC with the research team include IRC. (2016). *Client-Responsiveness Programming Framework. IRC's Approach to Accountable Programming*, Beta Version, December 2016; IRC. (2018). *Client-Responsive Programming Framework. IRC's Approach to Accountable Programming*; IRC. (2019). *Client Responsiveness Measurement Framework*, IRC, March 2019, also available at <u>https://bit.ly/3pw7vRe</u>; IRC. (undated). *IRC Client Responsiveness Introduction and FAQ*, IRC, also available at <u>https://bit.ly/3vahUEb</u>; IRC. (undated). *The Rapid Guide on Setting up Client Feedback Mechanisms*, IRC.

²⁶ Incentive workers are refugees hired by the IRC to conduct outreach activities for the organisation. They are a bridge between the IRC and the communities served.

Client feedback is collected through various proactive, reactive, and open feedback channels (see section 3.3 for more details). It is collected by field officers, who use paper logbooks located at all service points, and by incentive workers during outreach activities.²⁸ Feedback is then recorded on the online Feedback Registry with an integrated dashboard, which hosts all feedback sources. Focal points of each sector, who are field officers trained in client responsiveness, are in charge of transferring information contained in logbooks and forms into the online system.²⁹

The dashboard contains details on when feedback was collected, what the client reported, how the client wishes to be contacted for a response, any referral made to other IRC sectors or other external organisations, actions undertaken, and how and when the feedback loop was closed. It is paramount that the information on the online dashboard is correct (see 'Good practice: Recording feedback and managing data'). This is because the online dashboard is the tool MEAL and senior members of staff use to track the progress of the feedback and the response to clients. It is also used by MEAL staff to analyse feedback to inform decisions on programming.

While MEAL staff are generally responsible for the analysis, interpretation of the feedback is often done in teams.³⁰ Sector managers and coordinators assist MEAL staff to interpret the feedback, and identify adequate actions, responses and changes to make following specific and recurrent feedback. Findings are often discussed during IRC sector staff meetings and shared with partner organisations. Lydia Norbert (WPE MEAL Officer) explained that results from the feedback analysis are also discussed in quarterly meetings with partner organisations working on SGBV. In this way, challenges can be addressed with other organisations to better serve refugees.

GOOD PRACTICE: RECORDING FEEDBACK AND MANAGAING DATA

IRC Tanzania focal points used to record feedback by entering details from logbooks into Excel spreadsheets, which were often downloaded and re-uploaded on the cloud.

During the data collection phase of this evaluation, IRC Tanzania implemented a new system for recording feedback online. Staff are now using CommCare, a mobile platform that supports frontline workers to collect data and feedback from clients. Staff can record feedback from anywhere and information is automatically updated online and synchronised as soon as an internet connection is available.

The use of CommCare has considerably improved case and data management because it avoids any duplications and loss of data caused by downloading and uploading different versions of the same file.

Another platform used in the humanitarian sector is Kobo Toolbox. Mobile data collection platforms such as CommCare and Kobo Toolbox are relatively easy to set up and run, help save time, and reduce errors in data management and analysis.³¹

²⁸ Interview with an Education Manager.

²⁹ Focal points are responsible for recording feedback and cascading information on client responsiveness acquired through training to their colleagues.

³⁰ Interview with a WPE Coordinator and with Lydia Norbert (WPE MEAL Officer).

³¹ Interview with Samson Mange (Health and PRoL MEAL Manager). For other examples of good practice in setting up effective data collection systems see Drew, K. & Warnes, J. (2017). 10 steps to setting up an effective feedback mechanism, UNHCR, available at https://bit.ly/3rlj1LM and UNHCR. (2017). Feedback mechanisms in the Former Yugoslav Republic of Macedonia, UNHCR, available at https://bit.ly/3rlj1LM and UNHCR. (2017). Feedback mechanisms in the Former Yugoslav Republic of Macedonia, UNHCR, available at https://bit.ly/38mrgM.

3.2 CLIENT RESPONSIVENESS IN A MULTI-AGENCY SETTING

As promoted by CHS Commitment 6, coordinating the delivery of aid in settings where different organisations and agencies operate is essential to provide an effective, efficient, and timely humanitarian response. In refugee camps in Tanzania, the UNHCR, alongside government authorities, coordinates the activities of implementing and operating partners. Such a role is vital to avoid duplication of services and gaps in the humanitarian assistance.

Coordination is achieved through different practices, such as general camp coordination meetings or sectoral working groups for all organisations delivering specific services in the camp. Sectoral working groups are generally held on a quarterly basis and they are organised and chaired by the UNHCR alongside the designated implementing partners of the sector.³² During the general camp meetings and the working group meetings, all humanitarian actors involved discuss priorities and the planning of activities.

The UNHCR organises help desks within each camp, which are used by clients to file their requests or provide feedback in relation to any kind of service or a humanitarian organisation operating in the camp. Feedback is recorded through a specific tool which captures client details, when the feedback was provided, and which organisation is responsible to address the feedback. UNHCR then transfers this feedback to the relevant organisation. The organisation which receives the feedback from the help desk must then work on it, and return a template to UNHCR indicating when and how the feedback loop was closed and the actions undertaken as a result of the feedback.³³ This feedback collection happens independently of outlets that the IRC specifically designs and implements.

3.3 FEEDBACK AND COMPLAINT MECHANISMS: AWARENESS, USE AND CHALLENGES

For a client-responsive approach to be effective, humanitarian organisations must engage with clients and set up communication channels and functioning feedback and complaint mechanisms. The literature suggests that feedback mechanisms are effective when:

- Affected populations are aware of the feedback mechanisms and communication channels;
- The feedback channels are accessible to all including the most vulnerable and marginalised groups;
- Communities served clearly understand the purpose and uses of the mechanisms and what they can expect from them;
- Users feel safe in providing feedback and confidentiality is ensured;
- Feedback is acknowledged, referred to relevant parties, and responded to;
- Feedback is interpreted and trends identified so that analysis can inform programmatic decisions.³⁴

At the IRC, feedback from clients is collected through proactive channels, such as client satisfaction surveys and FGDs, and through reactive channels, such as suggestion boxes, hotlines and office walk-ins.³⁵ There are also open feedback channels based on less structured and more informal interactions between staff and clients.

The analysis of the 2020 multisectoral survey sheds light on clients' awareness of feedback channels, usage, and trust in communication with IRC.

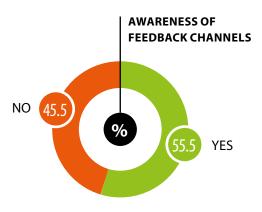
³² Interview with Elifrida Japhet (Deputy Education Coordinator).

³³ Interview with an Education Manager.

³⁴ Among others, see Bonino, F., Jean, I. & Knox Clarke, P. (2014). Humanitarian feedback mechanisms: Research, Evidence, and guidance. ALNAP Study, London: ALNAP/ ODI, available at <u>https://bit.ly/3rEZpZ6</u>; see also Bonino, F. & Warner, A. (2014). What makes feedback mechanisms work? Literature review to support an ALNAP-CDA action research into humanitarian feedback mechanisms, ALNAP working paper, London: ALNAP, available at <u>https://bit.ly/3quKix8</u>.

³⁵ Usually reactive channels are used by clients to report issues with service delivery or needs not addressed by current programming.

Figure 1: Clients' awareness of feedback channels (September 2020)



Notably, the survey revealed that only 54.5% of the 3,295 participants knew about available feedback channels (see Figure 1). FGDs with clients for the CYPD, Health, PRoL and WPE sectors confirmed limited general awareness of feedback mechanisms. For feedback mechanisms to be effective, it is paramount that clients are aware of the feedback mechanisms, their purpose, and what they can expect from them and from the organisation running them (see 'Tip: Communicating the reasons for using feedback mechanisms'). The youngest age group (10-14 years of age) showed the lowest level of awareness of available feedback channels, with only 40.1% aware of feedback mechanisms. Other age groups' level of awareness were higher, with 55.4% of 60+ year olds and 57.3% of 41-59 year olds aware.

Among the participants who were aware of feedback channels, 79.3% said they had used them to provide feedback. Of the individuals using feedback channels, the most frequently used channels were office walk-ins (47.6%) and 'through IRC staff' (27.6%), suggesting that face-to-face communication is preferred by most of the clients who provided feedback (see Figure 2).

The results suggest that office walk-ins are the most preferred feedback channel for 63.1% of respondents, followed by feedback through IRC staff (42.8%), toll-free hotline (27.9%), and suggestion box (24.1%). When communicating sensitive information, office walk-in remained the preferred channel for different age groups.

Preferences of feedback channels varied across different groups, which was also stressed by surveyed staff. For the youngest age group (10-14 years), the second preferred channel is the toll-free hotline, whereas older groups' second preferred

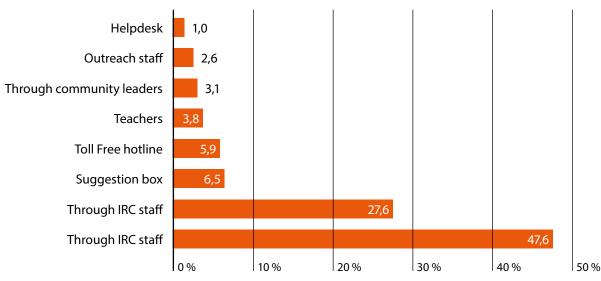


Figure 2: Feedback channels used by clients surveyed (September 2020)



Burundian refugees gather to learn couture and handicrafts at women's centre run by The International Rescue Committee (IRC) in Tanzania's Nduta refugee camp. © UNHCR/Benjamin Loyseau

channel was 'through IRC staff'. This may indicate that younger groups are more familiar or comfortable with technology compared to older age groups. FGDs with adolescents revealed that young people are also comfortable in providing feedback to both teachers and staff, or using the suggestion box.

Offering a variety of feedback channels is, therefore, important to allow clients to access and use the most appropriate for them.³⁶ If a client is looking for a more immediate reply, they can use the hotline, walk-in office or talk directly to a member of staff. Suggestion boxes allow clients to remain anonymous and they tend to be preferred by children and young people. As Christine Mdemu, (CYPD Coordinator) explains, 'the suggestion box is perfect for children because they feel safer and through the suggestion box, we were able to get some issues including some child abuse issues.'

TIP: COMMUNICATING THE REASONS FOR USING FEEDBACK MECHANISMS

Staff interviewed reported that sometimes feedback mechanisms are not used properly by clients. This applies especially in the case of the toll-free hotline as clients in several occasions had called just to check if the hotline was really free or if IRC staff picked up. Lizyberth Lyamuya (WPE Psychosocial Support Officer) reported:

We introduced [client responsiveness] for people but I think it is something we need to push more in order for them to know what we mean exactly when we say we need feedback from them.

This example shows that it is not only important to have feedback mechanisms in place and to ensure that clients know how to contact humanitarian organisations. Organisations must explain to clients the purpose and usefulness of feedback mechanisms, how they can provide feedback, and what they can expect from feedback mechanisms.

Further sensitisation activities may help raise clients' awareness of client-responsive mechanisms and how they can provide feedback.

³⁶ Wall, I. (2011). Delivering communications in an emergency response: observations from Haiti. *Humanitarian Exchange*, Special feature: Humanitarian Accountability, 52, 0DI, 39-41.

It is also essential that feedback channels are adapted to specific clients' abilities so that the mechanism can be more inclusive. For children, for instance, special cards are designed to facilitate the collection of feedback:

⁶⁶ To make it more friendly, we designed some cards and those cards are just plain cards with some emoji and the emoji looks like the child: happy, sad, crying or the child is surrounded by adults who are dangerous to them. For those who don't know how to write or read, they can just use the emoji because they understand the emoji more and they can just place that [in the suggestion box].³⁷

These cards allow children to express themselves and report issues that they may struggle to reveal in words.

Accessibility and trust in the feedback mechanisms are also important for a client-responsive approach to be effective. IRC staff indicated that not all channels may be accessible and that clients may find it difficult to use the toll-free hotline. This is because refugees in Tanzania struggle to access and register SIM cards due to government regulations and restrictions. As suggested by a PRoL officer, humanitarian organisations can overcome this by providing community leaders and incentive workers with mobile phones. This would help refugees communicate with humanitarian organisations and IRC could have better access to people who cannot easily move and otherwise would be excluded both from the use of feedback channels and services (see also 'Good practice: Including marginalised and vulnerable groups').

A crucial aspect of the appropriateness of feedback channels is confidentiality. Some clients expressed concerns that on some occasions feedback confidentiality may have been ignored. One client responding to survey questions on feedback mechanisms asserted:

There are some stations where when you submit your complaint or idea they do not take into account the privacy of the information; you find the information has already been leaked.

GOOD PRACTICE: INCLUDING MARGINALISED AND VULNERABLE GROUPS

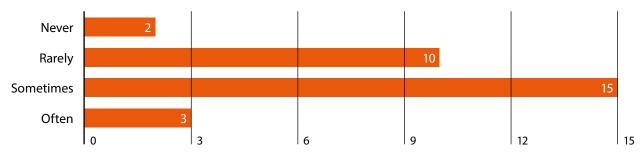
Providing community leaders and incentive workers with mobile phones can increase the two-way communication with clients, especially for those who have mobility issues. However, not everyone wishes to communicate with humanitarian organisations via their leaders or other members of their communities. Some may prefer to report their feedback in person especially when providing sensitive feedback.

In order to ensure people with disabilities and mobility issues can provide feedback as they wish, the IRC obtained a small grant from CIDA to focus on client responsiveness. As part of this grant, in December 2020, the PRoL programme conducted inclusive consultations with persons with disabilities, elders and all marginalised groups in camps and host communities. The purpose of the consultation was to identify the most appropriate feedback channels. Clients suggested the IRC to conduct regular FGDs in camps and host communities so that everyone can provide feedback. At the moment of writing, IRC Tanzania is implementing what clients suggested, and undertaking more frequent FGDs with marginalised groups. This kind of adaptation can make feedback channels more inclusive.

A participant to a Health FGD associated the problem with incentive staff who may need further training when dealing with feedback and sensitive matters. Breaches in confidentiality can have adverse effects on clients. It is therefore essential that further training on this can include incentive workers.

³⁷ Interview with Christina Mdemu (CYPD Coordinator).

Figure 3: Frequency at which changing of programming is applied following client feedback (number of staff)



3.4 HOW STAFF INCORPORATE CLIENT FEEDBACK IN PROGRAMMING

Staff surveyed and interviewed generally agreed that incorporating client feedback in programmatic decisions is important to address clients' needs and makes programming relevant. Adaptations can be incorporated by consulting clients using proactive channels (e.g. FGDs or surveys), by consulting the dashboard with the most updated trends on client feedback, or reviewing past feedback analysed and contained in reports produced by MEAL staff.

Data from the staff survey indicated that changing programming following client feedback is not straightforward. Only three members of staff (out of 30 who took part to the survey) declared that their offices often change programming and plans based on client feedback. Fifteen members of staff said that this happens sometimes. Ten admitted that this happens rarely, and two said this never happens (see Figure 3). The exact reasons for not including changes following client feedback remain unclear from the survey.

When asked what changes they have incorporated based on client feedback, staff said that they addressed clients' concerns mainly through a feedback and complaint mechanism (19), by changing programme delivery and activities undertaken (12), changing their behaviour (9), initiating new programmes requested by clients (8), or changing programme design (5). Four members of staff admitted that no changes had been made.

While staff who took part to the survey admitted that adaptations are not always made, staff, who were interviewed, seemed to provide a different scenario. Perhaps because of the more direct contact with the researcher, staff who were interviewed spoke more positively about client responsiveness. They generally agreed that changes were made following client feedback and provided some examples to support their statements.

Christina Mdemu (CYPD Coordinator) stressed that the use of client feedback is essential to improve programming and increase clients' satisfaction. For instance, CYPD followed children's suggestions to get more play kits. Parents and young people's views were taken into account when redesigning the curriculum to include more life skills activities in youth centres. In both cases, incorporating clients' suggestions was possible because CYPD managed to raise additional funding.³⁸

Lizyberth Lyamuya (WPE Psychosocial Support Officer) explained that incorporating client feedback ensures programming is relevant. For instance, women reported that instead of t-shirts for International Women's Day, they would rather get *kanga* or *kitenge* supplies.³⁹ Their requests were accommodated to follow clients' priorities.

³⁸ The redesign of the curriculum also helped to address the lower presence of girls in youth centres as their absence from these spaces was related to the lack of appropriate training.

³⁹ *Kanga* and *kitenge* are colourful fabrics used in specific African regions.

Adaptations that address clients' concerns were also made by the Health sector as staff adjusted the timing of some family planning appointments to allow women to attend when the centre is quieter.

Some of the changes implemented by different sectors were possible through minor adjustments of service delivery. Others may involve raising additional funding to accommodate clients' requests or the renegotiation of the use of funding with the donors (for an example of the IRC's success in balancing AAP with 'upward' accountability to donors, see 'Good practice: Involving donors in AAP').

3.5 HOW STAFF RESPOND TO CLIENT FEEDBACK

Bonino, Jean and Knox Clarke assert that '[a] feedback mechanism is seen as effective if, at minimum, it supports the collection, acknowledgement, analysis and response to the feedback received, thus forming a closed feedback loop.'⁴⁰ They also suggest that if the feedback loop is left open, this undermines the effectiveness of the feedback mechanisms.

IRC Tanzania staff indicated that there are different ways to close the feedback loop and the modality depends on the kind of feedback received.⁴¹ In order to close the feedback loop, certain steps are generally followed: acknowledge the feedback received, address clients' concerns immediately, or consult with a senior member of staff before responding to clients. If the feedback loop cannot be closed immediately, senior members of staff and MEAL staff support field officers in interpreting feedback and responding to clients.⁴²

GOOD PRACTICE: INVOLVING DONORS IN AAP

Thanks to a client-responsive approach, IRC Tanzania has identified better channels to communicate with clients.

The radio used to be the main channel used by IRC Tanzania for advocacy. However, client feedback indicated this was not the most useful way of sharing information.

The PRoL team asked the donor to adjust this aspect of programming to include more advocacy through community leaders, as suggested by clients. The donor agreed to allocate the budget for the radio dissemination to other activities.

Consultations with clients and discussions with donors allowed the IRC to provide more relevant programming and be more accountable.⁴³

The feedback loop can also be closed collectively through community dialogue meetings or interagency camp meetings with the whole community. When feedback and the response concern specific groups (e.g. women, children and young people, or people with disabilities), the IRC closes the loop through FGDs and listening sessions.⁴⁴ Staff explained that the feedback loop can also be closed by disseminating information through community leaders or through printed materials. Notably, three members of staff (out of 30 survey respondents) – two field officers and one manager – said that they do not close the feedback loop,⁴⁵ but reasons for their answers remain unknown.

⁴⁰ Bonino F., Jean, I. & Knox Clarke, P. (2014). Closing the Loop - Practitioner guidance on effective feedback mechanisms in humanitarian contexts. ALNAP-CDA Guidance. London: ALNAP/ODI, p. 2, available at <u>https://bit.ly/3cap6ay</u>.

⁴¹ Among others IRC. (Undated). *Guidance to Present, Interpret and Respond to Client Feedback;* and Bonino, F., Jean, I. & Knox Clarke, P. (2014). *Closing the Loop – Practitioner guidance on effective feedback mechanisms in humanitarian contexts;* Jacobs, A. (2010). Creating the missing feedback loop. *IDS Bulletin,* 41, 56-64.

⁴² Interview with Elifrida Japhet (Deputy Education Coordinator).

⁴³ Interview with Samson Mange (Health & PRoL MEAL Manager).

⁴⁴ Data from both the staff survey and interviews with staff.

⁴⁵ Given the low number of staff taking part to the survey and working for IRC Tanzania and in order to ensure anonymity is maintained, further information on staff sector or role will not be revealed.

CYPD Coordinator Christina Mdemu explained that in her sector, staff respond to parents' feedback through quarterly meetings. This is a useful moment to share information on how the IRC is working to address their concerns, discuss the progress made, and what programming CYPD is currently offering. They use similar ways to close the feedback loop for children:

If we have something to clarify, for children it is easier because they do access our safe space. So, through the session we are having with them, if it is a common issue we need to clarify, we can just tell them that this was raised but we are working on this. For instance for the toys last year, it was something that was coming up frequently and we got some few funding and we bought those toys. So, we responded to them that we are working on this and when we brought them, we told them, 'we have worked on this and now we have added more playing kits, more toys for you to be able to play with.'

Closing the feedback loop is a very important component of a client-responsive approach as it helps to build trust with clients. As a PRoL manager suggested:

I think the clients can feel that they are wasting their time if they go there and provide feedback and [staff] do nothing. By closing the feedback [loop] first of all, we promote the well-being of our clients. And also, we promote trust.

Humanitarian organisations must endeavour to always discuss with clients why their feedback could or could not be used, how and when they should expect to see the changes, and clearly explain how their feedback has been used or will be used to inform programmatic decisions. Closing the feedback loop demonstrates that staff listened to clients' concerns. It thus helps managing clients' expectations, and building and maintaining trust with affected populations.

3.6 CONCLUDING REMARKS

The development and implementation of the Client Responsiveness Programme Framework aims to address CHS Commitment 4 and 5, which focus on communication with and participation of clients in decision-making and the setting up of responsive mechanisms to handle complaints. Data shows that good policies and practice to achieve global humanitarian standards of accountability are in place at IRC Tanzania. The country office has set up feedback mechanisms that allow clients to use the channels they are more comfortable with or that are more accessible to them. The PRoL sector, in particular, is also implementing new strategies to include people with disabilities through the running of more frequent FGDs in different zones of refugee camps.

Client responsiveness and tools are applied consistently across all sectors (CYPD, Education, Health, PRoL and WPE). Staff across these sectors use paper logbooks to collect feedback and transcribe feedback on the online Feedback Registry with an integrated dashboard. The introduction of the mobile platform CommCare proved particularly useful and successful for managing data, progress of responding to feedback and analysis to identify trends that can inform programmatic decisions.

While good policies for the implementation of AAP are in place, data suggests that only 54.5% of clients surveyed are aware of the feedback mechanisms and not all clients understand their purpose and what to expect from them. This demonstrates that more work is needed to publicise with clients, clarify the reasons for having feedback mechanisms and what clients can expect from a client-responsive system.

Data from staff interviews indicates that all sectors have made some changes following client feedback. However, while different sectors showed evidence of programming adaptation, staff surveyed indicated that changes following client feedback do not occur frequently. This demonstrates that more efforts are needed to use client feedback in programmatic decisions.

4. EVALUATING IRC TANZANIA CLIENT RESPONSIVENESS

This chapter explores opportunities and difficulties in adopting a client-responsive approach. It offers an overview of clients' satisfaction rates and clients' main concerns. This helps better assess challenges that IRC Tanzania and humanitarian organisations more broadly face when implementing client responsiveness: the management of clients' expectations, contextual limitations, recording of client feedback, and involving clients in decision-making and fostering their participation. The chapter highlights some good practices adopted by IRC Tanzania in relation to the challenges discussed, and offers some tips that humanitarian organisations may implement to include clients in decision-making.

4.1 CLIENT FEEDBACK ON PROGRAMMING AND SOME GENERAL TRENDS

4.1.1 CLIENTS' SATISFACTION WITH IRC PROGRAMMING

The 2020 multisectoral annual survey provides some indication of how different sectors are performing based on clients' level of satisfaction with i) relevance; ii) quality; iii) respectful and dignified treatment; iv) ease of access to services; v) safety while receiving the services; vi) impact of programming; and vii) voice and empowerment. This final category is most relevant to client responsiveness as it indicates how much clients feel their opinions are taken into account in programmatic decisions (more details on this specific aspect in section 4.2.1).

The results from the survey indicate that overall satisfaction rates on the quality of programming was generally high, with the highest overall satisfaction rate being 96.7% for WPE and the lowest being 84.4% for CYPD (see Figure 4).

When disaggregating responses by age, the highest levels of satisfaction for all sectors were among the younger age groups, while older groups, especially those aged 60+, were less satisfied. Compared to other age groups, older clients reported lower levels of satisfaction in the area of 'access', 'safety', and 'voice and empowerment.' This is especially for PRoL, with 31.4% of 60+ age group responding that it did not meet satisfaction criteria for 'access.' This trend indicates a topic where IRC staff should seek additional feedback.

In general, people with disabilities were less satisfied with the services when compared to people without disabilities. There was a greater difference in satisfaction rates between people with a disability and people without a disability for

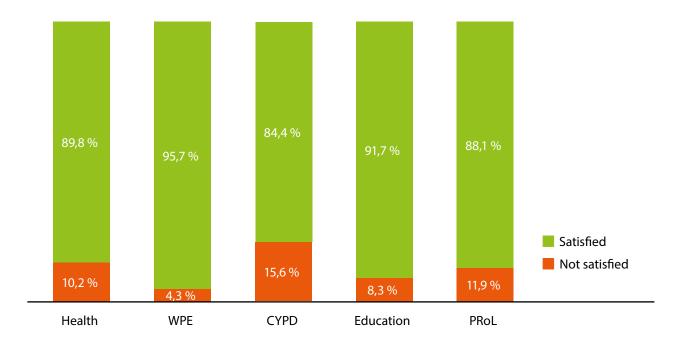


Figure 4: Overall Programme Satisfaction Rates (September 2020)

the CYPD and Education programmes (see Figure 5).⁴⁶

In particular, people with a disability showed less satisfaction with the relevance of the Health services (29.8%) and Education programme (38.7%), and were generally concerned with the accessibility of services. In their comments, many indicated that they cannot access services because of their condition and, for this reason, they feel excluded and left behind. Participants to CYPD FGDs, for instance, reported concerns that not all children and young people are able to access CFSs because of mobility issues. In order to improve accessibility, clients suggested that the IRC and humanitarian organisations could increase home visits or provide some form of transportation or walking aids for people with mobility issues.

Based on the annual survey results, satisfaction rates for the quality of IRC's programming improved between 2019 and 2020. In 2019, 66% of clients surveyed were satisfied with IRC services.⁴⁷ In 2020, satisfaction was over 80% of clients, with PRoL and CYPD recording the best year over year improvements.⁴⁸ Staff interviews suggested that the 2019 survey helped IRC Tanzania identify and improve gaps and areas that needed attention.⁴⁹ According to them, this indicates that a clientresponsive approach and the incorporation of client feedback in programming helped address affected populations' needs, making programmes more relevant and effective.

⁴⁶ For CYPD, the overall satisfaction for people with a disability was 72.8% and for people without a disability 85%. For Education, the overall satisfaction for people with a disability was 79.6% and for people without a disability 92.7%. The greatest differences in satisfaction rates between people with a disability and people without a disability was for CYPD programme on 'voice and empowerment' (57.1% people with a disability who feel they are heard and listened to compared to 83.5% of people without a disability) and quality (66.7% people with disability satisfied and 83.5% people without a disability satisfied). For the Education programme, the greatest difference between the two groups was for 'relevance' (61.3% of people with a disability satisfied compared to 86.8% of people without a disability), 'quality' (78.7% of people with a disability), and 'respectful and dignified treatment' (77.3% of people with a disability satisfied compared to 93.4% of people without a disability).

⁴⁷ IRC Tanzania. (2019). Client Satisfaction Survey, Kigoma Region, Tanzania. IRC, December 2019. Document shared by IRC Tanzania with the research team.

⁴⁸ IRC. (2020). Client Feedback Survey: How do our clients rate us?. IRC, October 2020. Document shared by IRC Tanzania with the research team.

⁴⁹ Among others, interview with Samson Mange (Health and PRoL MEAL Manager). Please note that for the 2020 survey, IRC Tanzania used a new index to measure level of satisfaction. While survey questions were not exactly the same, overall satisfaction level can still be compared.

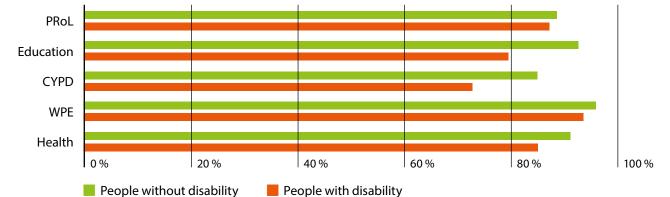


Figure 5: Levels of overall satisfaction for people with or without disability (September 2020)

4.1.2 CLIENTS' KEY CONCERNS

Clients frequently mentioned that they need and wish for livelihoods opportunities in order to become self-reliant. Specifically, they request income-generation opportunities, training, provision of tools and equipment (e.g. sewing machines), and financial support to start a business. However, since the Tanzanian government is now prioritising repatriation over integration, further livelihood programme opportunities may not be possible.⁵⁰

Linked to livelihood activities, clients stressed the value of education. Many requested additional supplies and adaptation of curricula to children's needs and abilities so that education can be more inclusive. Many asked IRC Tanzania to provide more teachers, learning materials, desks and uniforms, stressing that the lack of supplies in schools affects children's learning experience and may even lead to drop-outs.

Respondents to the survey and FGDs also discussed potential 'favouritism' in service delivery across different sectors. This was a general perception particularly common among Burundian refugees living in Nyarugusu refugee camp. Comments on potential bias in service delivery were more frequent in relation to CYPD activities in Nyarugusu camp and among young females aged 10-14.

GOOD PRACTICE: USING FEEDBACK TO ADAPT SGBV PROGRAMMING

Following male clients' feedback on the need to assist men who experience SGBV, IRC Tanzania organised a series of FGDs with male participants to explore better ways to respond to SGBV that affect men more specifically.⁵¹

At the time of writing, suggestions offered by male clients in FGDs are being evaluated and integrated into programming.

This example shows that humanitarian organisations should never assume how programming can change based simply on preliminary consultations. They must endeavour to regularly collect further targeted feedback and information to better understand how, following preliminary consultations, programming can change according to clients' needs.

WPE FGDs with men revealed that some clients thought that women were helped more than men. Clients suggested that adolescent boys could be provided with hygiene kits in a similar manner to those provided to adolescent girls. Others said: 'We ask that you keep an eye on men's cases

⁵¹ Interview with a WPE Manager.

⁵⁰ Beaumont, P. (2019). Tanzania warns return of hundreds of Burundian refugees is just the start. *The Guardian*, 7 October 2019, available at https://bit.ly/3pBI80a.

because they are also being abused,' suggesting that SGBV-related services should specifically include support and protection for men who experienced abuse (see 'Good practice: Using feedback to adapt SGBV programming').

Some clients said they had never received assistance from the IRC. In some cases, failure to access assistance may indicate a potential lack of information on service delivery. One client said: 'The day of delivery of these [PRoL] services was not communicated to us.' Lack of information was also reported by some clients in relation to the Health programme and, in particular, the potential side effects of medications.

When expressing their concerns for safety, some clients suggested that they may not feel safe when accessing certain services. As indicated by clients, overcrowded facilities, the lack of information on services, staff's lack of empathy, or issues with the timeliness in the distribution of aid or access to services may affect clients' feelings in relation to safety. Burundian refugees, more specifically, expressed fears in relation to their potential repatriation and asked the IRC to help them stay in Tanzania or be resettled in a third country.

Many clients requested additional supplies, especially of non-food items (e.g. buckets and soap, school supplies, products for personal hygiene), more facilities and the improvement of existing ones. Clients asked the IRC to have more schools, playgrounds and sport facilities for children and young people, and additional health facilities to satisfy the high demand for these services.

Participants to the FGDs and the survey respondents generally acknowledged that IRC staff are doing their best, but also indicated that the organisation may be understaffed and unable to meet all clients' needs. In a few instances, clients suggested increasing the number of field staff, including the number of incentive workers, which could assist with the service delivery.

4.2 DO CLIENTS FEEL LISTENED TO?

4.2.1 CLIENTS' PERCEPTIONS OF THEIR ABILITY TO INFLUENCE DECISION-MAKING

Data from the 2020 annual survey indicated that client respondents are generally satisfied with how IRC Tanzania takes clients' views into account when implementing projects. All programmes had a satisfaction rate of over 80% for the 'voice and empowerment' category, indicating that clients felt their opinions were generally taken into account in programmatic decisions (see Figure 6).

People with disabilities reported lower levels of satisfaction on the 'voice and empowerment' category across all programmes compared to people without a disability. For CYPD, only 57.1% of respondents with disabilities felt their opinions were being considered compared to 83.5% of people without disabilities. While the inclusion of people with disabilities in the provision of feedback is a good practice, this data indicates that the IRC should further ensure their feedback is then used and that the feedback loop is adequately closed to explain the reasons why their feedback cannot be implemented.

Although the 2020 annual client satisfaction survey indicated that 'respectful and dignified treatment' has excellent levels of satisfaction across sectors (above 90%), some clients still expressed concerns with the way they are treated by IRC staff.⁵² Responses to the survey include: 'They see you as a person of no importance when you get there. Secondly, if they listen to you, there is no follow-ups,' or 'They were shouting at us for no reason, they were not listening.' As Lizyberth Lyamuya (WPE Psychosocial Support Officer) suggested, feedback like this can help the IRC to identify where there are problems in relation to staff attitude, and where IRC should sensitise staff to be more responsive, respectful and attentive to clients' difficulties and needs. Feedback is especially important when trends identify specific support centres or members of staff who do not treat clients with respect.53

⁵² Data from both the survey and FGDs across different sectors.

⁵³ Interview with a WPE manager.

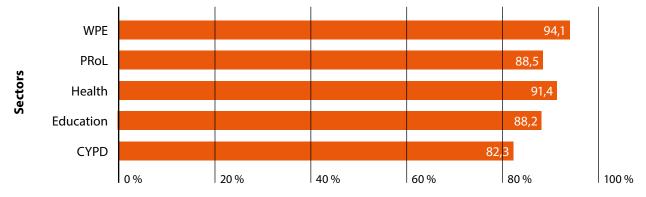


Figure 6: Percentages of clients satisfied with how the IRC listens to their concerns (September 2020)

Percentage of clients satisfied with how IRC listens to their concerns

4.2.2 CLIENTS' FEEDBACK ON IRC'S ABILITY TO RESPOND

The client survey indicated that 83.2% of clients who used the feedback channels received a response. The Health sector had the highest rate of closing the feedback loop (91.3%) while CYPD had the lowest rate, with only 53.3% of clients surveyed receiving a response after raising a concern or providing feedback. Among the 1,185 participants who used the feedback channels and received a response, 96.8% indicated they were satisfied. This high level of satisfaction among those who received a response is encouraging as it suggests that when staff close the feedback loop, they do so effectively (see 'Tip: Make clients aware of small and big changes').

Clients who did not receive a response or were not satisfied with how the IRC closed the feedback loop indicated that the response was not timely or that not receiving a response makes providing feedback useless. This was also stressed in FGDs, especially for the CYPD sector, where some participants reported that they did not receive a response to their feedback. Respondents said, 'we give suggestion but we don't get the feedback and we don't know where our suggestions end to' and 'there are materials we asked for and we have not received response.'

Clients are generally satisfied with the responses received, though in some cases the IRC failed to

TIP: MAKE CLIENTS AWARE OF SMALL AND BIG CHANGES

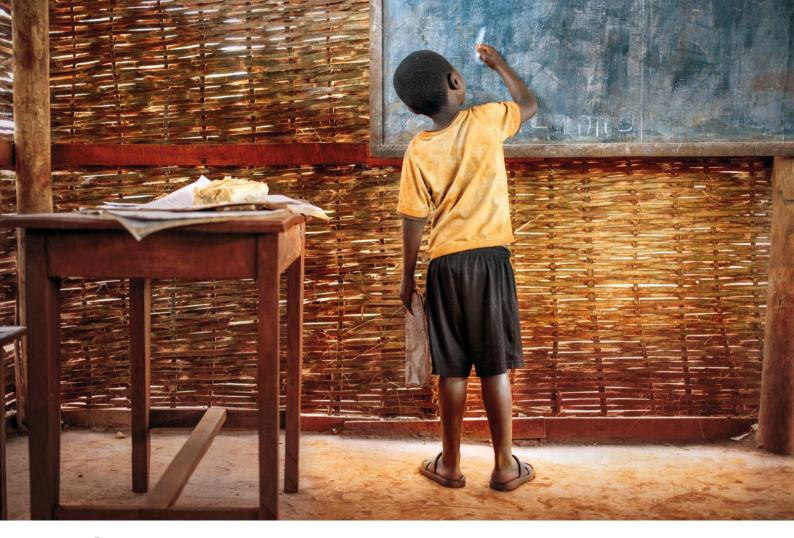
Literature on closing the feedback loop suggests that humanitarian organisations tend to discuss with clients the smaller changes and adaptations made to programming (e.g. on delivery modality or timings). Larger and more strategic changes following client feedback do not seem to be shared.

Humanitarian organisations must endeavour to communicate with clients information on how their feedback and suggestions have informed more significant changes.

If affected populations see that their views are taken into consideration, they would be more inclined to use the feedback and complaint mechanism again and to participate in discussions which aim to shape programmatic decisions.⁵⁴

respond to concerns raised by clients or the feedback loop was not closed in a timely fashion. Literature on humanitarian feedback mechanisms indicates that trust in the feedback mechanisms and the organisation that runs them is an important element for the effectiveness of a client-responsive system. Trust in the feedback

⁵⁴ Bonino, F., Jean, I. & Knox Clarke, P. (2014). Humanitarian feedback mechanisms: Research, Evidence, and guidance, especially p. 75.



🙆 A young Burundian refugee writes on a blackboard during a Kirundi language class at Jugudi Primary School in Nyarugusu refugee camp. 🖾 UNHCR/Georgina Goodwin

mechanisms and humanitarian organisations is undermined if responses to feedback are delayed and this risks compromising the credibility of the feedback system.⁵⁵

4.2.3 FAILURE TO RECORD FEEDBACK AND ITS CONSEQUENCES ON CLIENT RESPONSIVENESS EFFECTIVENESS

Another challenge to client responsiveness implementation by IRC Tanzania is internal. When triangulating client survey data with their own records, IRC staff noticed that their records showed fewer feedback entries than those reported by clients in the survey. This implies that not all feedback provided by clients was recorded.⁵⁶ One response from the staff survey suggested that: Our biggest challenge comes from the perspective of recording feedback we do collect, which prevents us from properly using the information in programme design and decision-making. Results from the recent [2020] client satisfaction survey suggested the same thing - a large number of clients reported that they had provided feedback but our records show only about 200 instances in the past year and a half (while the sample from the survey that said they had provided feedback was itself 3 times higher than this number). Much of this happens because programmes have not prioritised client feedback and so when staff receive feedback, they do not report or record it properly.

This also explains the reason why the feedback loop was not closed in some cases.

⁵⁵ Bonino, F. & Warner, A. (2014). What makes feedback mechanism work? Literature review to support an ALNAP-CDA action research into humanitarian feedback mechanism, p. 15.

⁵⁶ IRC. (2020). Client Feedback Survey: How do our clients rate us?. Document shared by IRC Tanzania with the research team.

Christina Mdemu (CYPD Coordinator) indicated that although staff are encouraged to record all feedback, sometimes staff did not record the feedback when they considered it a duplication of previous entries. The literature suggests that all feedback collected from affected populations must always be recorded, even if humanitarian organisations keep getting similar instances over time.⁵⁷ Recording feedback helps humanitarian organisations identify ongoing challenges and gaps in humanitarian response, but also compare client feedback over time.

Failing to record feedback has serious implications on the closure of the feedback loop with clients. It can impact the trust clients place on the feedback mechanisms and the organisation which runs them, and ultimately affect the analysis and the necessary programmatic changes requested by clients to make aid more relevant and effective.

Closing the feedback loop starts from the consistent recording of client feedback (see 'Good practice: Finding dedicated times to record feedback'). However, for a client-responsive approach to be effective, its use, functioning, and purposes must be clear to both clients and staff. Humanitarian organisations must ensure that purpose and expectations of the use of feedback mechanisms are clear to staff too.⁵⁸ As funding is increasingly dependent on good AAP practices, as promoted by the Grand Bargain, humanitarian organisations should consider extending training in client responsiveness, its principles and best practices to all staff.

GOOD PRACTICE: FINDING DEDICATED TIMES TO RECORD FEEDBACK

Failure to record feedback can impact humanitarian organisations' ability to make necessary changes and undermine clients' trust.

To ensure feedback is collected, IRC Tanzania managers and supervisors use monthly staff meetings to remind everyone that all feedback must be recorded and to ask if any feedback has been collected.

Interviews with staff revealed that supervisors helped field staff finding their own strategy to ensure feedback is always recorded. Field officers in charge of recording feedback collected could identify a dedicated time of the day or the week to transfer data from log-books to the dashboard.

In this way, no feedback would be lost, feedback data are recorded in the system, used to inform programme and clients are more likely to receive a response.

4.3 CHALLENGES OF ACCOUNTABILITY TO AFFECTED POPULATIONS

When implementing a client-responsive approach, humanitarian organisations can face different challenges, both in terms of limited resources and in relation to the specific contexts in which they operate. IRC Tanzania staff said that multitasking, the lack of financial and human resources, managing client expectations and limitations derived from the hosting country's policies towards refugees are the most pressing challenges.

⁵⁷ Bonino, F., Jean, I. & Knox Clarke, P. (2014). *Humanitarian feedback mechanisms: Research, Evidence, and guidance*, p. 72.

⁵⁸ *Ibid.*, p.25.

EXAMPLE IN PRACTICE: MANAGING EXPECTATIONS

Christina Mdemu (CYPD Coordinator) explained that for positive parenting sessions, parents often ask for t-shirts or food. To manage their expectations, staff clarify that because parenting sessions last for only two hours, the IRC can provide only refreshments.

The clear communication of objectives, scope and expectations of programmes and activities are critical for the management of clients' expectations.

Heavy workloads and the need to multitask can have negative consequences in the implementation of a client-responsive approach. Some of the staff interviewed asserted that they feel under pressure to assist clients, and may struggle to find the time to also record feedback. This may be especially true for focal points as recording feedback is a responsibility they have in addition to their ordinary tasks as field officers.

Even though IRC Tanzania seems to be following best practices to support AAP approaches⁵⁹ including clear definitions of roles and responsibilities in relation to client responsiveness, some staff suggested that recording feedback may not be perceived as a priority compared to other tasks (e.g. case management) and it may be understood as an activity which is separate and different from the provision of humanitarian assistance. During interviews, some staff members suggested that, to overcome this, there could be a dedicated person for client responsiveness and for the recording of client feedback. However, while according to staff this would speed up feedback resolution and ensure that no feedback is lost, this approach would risk creating siloes and relegating

client responsiveness-related activities to few members of staff only, losing a client-responsive organisational culture at large (for more on this aspect, see section 5).

Staff said that managing clients' expectations is also a concern when adopting a client-responsive approach. Staff who responded to the survey felt that: negative feedback cannot be addressed because clients' expectations are too high (11 out of 30 survey respondents); programmes are less effective because clients do not understand what is achievable (8); programmes are less effective because staff cannot meet clients' expectations (7); and programmes are less effective because clients do not know what they need (4). Some staff interviewed thought that adopting a clientresponsive approach may actually increase clients' demands for services beyond the available human and financial resources. In general, staff recognised that clients' suggestions are valuable, but voiced concerns that it is then difficult to translate them in programming when resources are limited.⁶⁰ In these cases, it is important to manage expectations from the start, and explain to clients what the organisation can do, what cannot be done or what can become a priority for the next round of funding available (see 'Example in practice: Managing expectations').

Incorporating client feedback in programming is not always feasible due to contextual limitations beyond the IRC's control. In Tanzania, this is especially true in relation to requests for incomegenerating activities. Through the survey and FGDs, clients requested training, financial and material support to start their own business. However, due to the Tanzanian government's policy to encourage refugees' repatriation, humanitarian organisations are not able to offer these supports.⁶¹ The only way to manage expectations in these cases is to make clients aware of IRC's remit and governmental guidance.⁶²

⁵⁹ Bonino, F. & Warner, A. (2014) What makes feedback mechanism work? Literature review to support an ALNAP-CDA action research into humanitarian feedback mechanisms, especially p.17.

⁶⁰ Interview with a WPE Manager.

⁶¹ Interview with Christina Mdemu (CYPD Coordinator) and a PRoL officer.

⁶² Interview with Elifrida Japhet (Deputy Education Coordinator).

To manage expectations, IRC staff must clarify the client-responsive approach with clients at different phases of the programme cycle; it does not mean that clients will obtain anything they request, but that they can influence programming within the budget available and in the respect of the host country's regulations. As the literature on the core principles of AAP suggests, 'programme participants need to be clear on what the agency is trying to achieve before they can provide informed and useful feedback on it.'⁶³

4.4 ASSESSING AND FOSTERING CLIENTS' PARTICIPATION

Staff interviewed agreed that while there are challenges in implementing a client-responsive approach, the benefits of adopting such an approach exceeds the difficulties. The collection and incorporation of client feedback in services can enhance clients' sense of ownership of programming and improve the quality, relevance, impact, and sustainability of humanitarian response. Client responsiveness is a great opportunity to understand clients' needs and can contribute to improving the relationship between humanitarian staff and clients. It, thus, increases trust and creates bridges for communication.

All staff generally valued clients' feedback and recognised that clients are better placed to understand the needs of their communities. Client feedback helps staff make necessary changes to address clients' needs and priorities. A protection officer explained that:

Client responsiveness is good because it helps us change programming and how we provide services. It also allows us to serve people according to their needs. If we do not serve people according to their needs, it sounds like a waste of time and a waste of resources. But if we work on client feedback, I think we will serve people according to their needs.

TIP: FROM CONSULTATION TO GREATER PARTICIPATION

IRC Tanzania staff agreed that the more clients are involved in programmatic decisions, the more they tend to support programming. If they share decisional power, they are more likely to feel part of the project. This can lead to a greater sense of ownership of activities and programmes, which can then run smoothly and be more impactful.

To move from consultation to involvement of clients in decision-making, humanitarian organisations can use existing mechanisms of engagement. Rather than conducting FGDs or listening sessions to extract information, they can use these occasions to discuss options of programme design, changes and adaptations. With time these groups may be able to become working groups that propose and advise humanitarian organisations to shape existing and future programmes.

While staff who took part to the evaluation agreed that client responsiveness improves programming, they also recognised that further steps could be undertaken to realise the full potential of a clientresponsive approach.

The majority of staff who took part to the survey reported that clients are consulted on programmatic decisions, but the level of involvement varies. Clients are consulted at different phases of the programme cycle, especially at the design and close-out phases which are used to inform programmatic decisions on future programming. They said clients seem to be more involved in decision-making and may have more influence in programmatic decisions during the implementation phase. One coordinator admitted that their office does not usually consult clients on their needs and activities to be undertaken.

⁶³ Bonino F., Jean, I. & Knox Clarke, P. (2014). Closing the Loop - Practitioner guidance on effective feedback mechanisms in humanitarian contexts, p. 25.

While incorporating client feedback is an important first step to implementing a clientresponsive framework, the spectrum of public participation stops at the consultation phase. Feedback is collected by field staff, analysed by MEAL staff and shared with managers and coordinators or in programme meetings to discuss the necessary adaptations. For now, communities are not given opportunities to be involved in programmatic decision-making or to come together with staff to discuss the analysis of the feedback or the most appropriate next steps.

At IRC Tanzania, there are, however, some attempts to move beyond consultation towards more active involvement of clients in programme decisionmaking. Elifrida Japhet (Deputy Education Coordinator) said that community empowerment is promoted and that there are instances where decision-making is more in the hands of clients such as community engagement in school activities through the 'score card' programme. Through this initiative, teachers, parents and community representatives have the power to contribute to and implement 60% of the programme. This is a welcomed practice and similar initiatives should be extended to other programmes so that humanitarian organisations will become more accountable to clients and deliver assistance that is more relevant and effective (see 'Tip: From consultation to greater participation').

Enhancing further participation in decisionmaking is crucial to achieve AAP standards promoted by the CHS commitments and the Grand Bargain Participation Revolution. The latter, in particular, stresses the importance of moving from the mere collection and analysis of feedback to more participatory approaches that could achieve greater AAP and ultimately improve the quality and relevance of humanitarian programming.⁶⁴

4.5 WHAT DO STAFF THINK OF CLIENT RESPONSIVENESS?

According to the staff survey, IRC Tanzania staff generally valued client feedback and acknowledged that clients and communities served are better suited to identify what programmes should focus on and include. As Figure 7 shows, the overwhelming majority of staff who responded to the survey agreed that programme quality improves with the use of client feedback.

When asked to explain why, staff recognised that clients know their needs better than staff, and that client feedback must be considered to identify gaps in service delivery and to make programming more relevant.

Some stressed that a client-responsive approach presupposes two-way communication, which is key for creating an environment of trust and is also essential for accountability:

If you receive something, you need to provide feedback to them that will be an effective response. So, if someone received something from the client and have not provided detailed information, we can't call it client responsiveness, it will be collection of data.⁶⁵

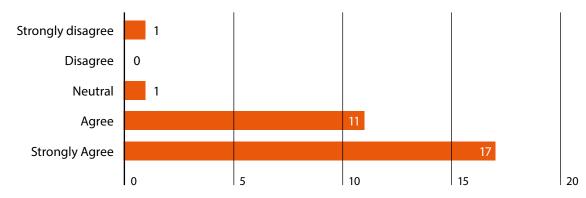
Staff respondents list the following activities as parts of client responsiveness:

- Use of feedback from past or other organisation to inform design (18);
- Asking clients which feedback channel they prefer (17);
- Welcoming negative feedback (16);
- Asking clients what they need before applying for funding (13);
- Addressing negative feedback (12);
- Discussing with clients ideas for the next project (7);

⁶⁵ Interview with Elifrida Japhet (Deputy Education Coordinator).

⁶⁴ Among others, Metcalfe-Hough, V, Fenton, W., Willitts-King, B. & Spencer, A. (2021). *The Grand Bargain at five years: An independent review,* Humanitarian Policy Group. London: ODI; and CHS Alliance. (2020). *Humanitarian Accountability Report. Are we making aid working better for people affected by crisis?*. Geneva: CHS Alliance.

Figure 7: Staff's perceptions on usefulness of client responsiveness in improving programme quality (number of staff)



- Letting clients decide what the IRC should prioritise (7);
- Discussing with clients the next project and include their feedback in decision-making (6);
- Involving clients in decision making and designing programme with them (6).

Survey responses indicate that the majority of staff consider consultation methods to be a part of client responsiveness activities. Directly involving clients in decision-making is less frequently recognised as a key element of AAP.

The results of the staff survey also suggest that staff normally inform clients about what is happening only after the IRC have completed the design phase.⁶⁶ Two MEAL officers asserted that decisions seem to be undertaken at the senior management level and may be 'governed by either donor requirements or IRC strategic plans or both.'

Most survey respondents thought that their sector is prioritising client responsiveness through training and allocation of human and financial resources. However, five respondents out of 30, including two senior staff members and two MEAL officers, thought that their sectors were not prioritising client responsiveness. This may indicate that staff have different views and perceptions on what constitutes adequate support. One coordinator acknowledged that involving and consulting clients is an area that must be improved, but recognised that there are significant challenges humanitarian organisations face in the implementation of a client-responsive approach:

Sometimes the turn-around for a new project can be as little as one week – this makes it very difficult to consult with clients (although not impossible) [...] unfortunately, it has become a bad habit within the humanitarian sector to design projects from the top down rather than the bottom up. We can and should improve.

While staff who responded have a positive perception of client responsiveness and its ability to address clients' priorities and aspirations, further support to implement AAP and achieve international AAP standards is needed.

⁶⁶ See also Lough, O. & O'Callaghan, S. (2021). Five years on from the World Humanitarian Summit: lots of talk, no revolution. *ODI*, 21 May 2021, available at: <u>https://bit.ly/31zw5rY</u>; Wintour, P. (2021). Humanitarian system not listening to people in crises, says UN aid chief. *The Guardian*, 21 April 2021, available at <u>https://bit.ly/3ds5Pmc</u>.

4.6 CHALLENGES FOR CLIENT RESPONSIVENESS IN A MULTI-AGENCY SETTING

Staff interviewed said that working in an interagency setting brings some benefits. For example, a PRoL manager stressed that sectoral working groups are opportunities to discuss clients' feedback and to address needs that the IRC alone cannot address because of limited resources. Referrals to other organisations are also important. For instance, if clients with disabilities complain because they don't receive wheelchairs and the IRC does not have a budget to distribute mobility aids, a referral is made to other organisations who have that budget and can offer the service (see 'Tip: How to handle fluctuations in service delivery in a multi-agency setting').

TIP: HOW TO HANDLE FLUCTUATIONS IN SERVICE DELIVERY IN A MULTI-AGENCY SETTING

The presence of different organisations in humanitarian contexts could confuse clients. There are constant fluctuations in service delivery and changes of service providers, depending on funding cycles.

When a humanitarian organisation stops providing a particular service, they must communicate such changes to affected communities and clearly explain when they will cease to provide the service and which organisation will take over. Ongoing communication with clients on exit strategies is vital to keep communities informed about who is responsible for what and ensure due accountability. Despite these benefits, IRC Tanzania staff also recognised that the coordination of humanitarian response is a challenge in itself. According to one programme coordinator, coordination can be particularly difficult because humanitarian organisations compete for funding and resources. Instead of cooperating to identify gaps to address clients' needs, organisations may focus on their own priorities. This is particularly detrimental for clients and contravenes the principles of CHS Commitment 6. If organisations do not collaborate, they risk duplicating assistance and neglecting affected populations' priorities and needs.

Some senior members of staff complained that referrals to other organisations may not be working as they should. There were instances in which clients returned to the IRC to complain about the lack of response from another organisation. While recognising the good quality of services, one client in a PRoL FGD said:

There should be more improvement on follow up especially [for] those services like referrals given from the IRC to other agencies. It discourages when no follow up is made and [clients] feel they are being neglected.

If any organisation ignores clients' feedback, that can compromise the relationship with and trust in humanitarian organisations overall. As the 2020 UNHCR Operational Guidance on Accountability to Affected People (AAP) states, '[t]he humanitarian community is commonly seen as one entity by communities, and it is common for complaints relating to partners or other agencies to be channelled to UNHCR and vice versa.'67 Affected people should be able to choose their preferred and most accessible channel to raise concerns or provide feedback 'regardless of which agency operates it.'68 Failure of one organisation to respond to referrals risks damaging the credibility and reputation of other organisations operating in the camp and the whole humanitarian response.⁶⁹

⁶⁷ UNHCR. (2020). Operational Guidance on Accountability to Affected People (AAP), UNHCR, September 2020, p. 26, available at https://bit.ly/32Xq7li.

⁶⁸ Ibid.

Featherstone, A. (2011). United we stand? Collective accountability in the humanitarian sector. *Humanitarian Exchange*, Special feature: Humanitarian Accountability, 52, 0DI, 5-7.

While policies and guidelines to facilitate the coordination of humanitarian response are in place in the refugee camps in Tanzania, IRC staff and clients indicate that in some cases the system may not be conducive to a coordinated and complementary humanitarian response.

It is then paramount that clear referral systems and protocols are in place so that feedback can be handled and responded to in an appropriate and timely fashion. This would help establish an inter-agency system where complaints are better investigated and responsibilities and accountabilities better defined.⁷⁰

4.7 CONCLUDING REMARKS

Sources show that the feedback loop is generally closed, but one of the main outstanding problems is recording feedback. Not all feedback received from clients was properly recorded which can have significant implications for the effectiveness of feedback mechanisms. If feedback is not recorded, humanitarian organisations may fail to identify trends and make the programmatic changes needed and fail to close the feedback loop. This can undermine the effectiveness of humanitarian response because clients may feel that sharing their views and concerns is pointless. Staff acknowledged that coaching and support can be key for the implementation of a client-responsive approach. Senior members of staff can help officers identify strategies to ensure client feedback is duly collected and recorded.

IRC Tanzania staff generally valued client feedback and acknowledged that programme quality improves with its use. Staff tended to consider consultations as the main activities of client responsiveness. They did not frequently cite the participation of clients in decision-making as a key element for the achievement of AAP. While incorporating client feedback is a first step to implementing a client-responsive framework, IRC Tanzania's spectrum of client participation seems to stop at the consultation phase. To fully achieve CHS Commitment 4, more participatory approaches, such as setting up clients' working groups, can be adopted to enhance humanitarian organisations' accountability.

Data analysed showed that the application of client responsiveness also presents some challenges that may also be experienced by other humanitarian organisations.⁷¹ These include: potentially heavy workloads that may impact on the recording of feedback, managing clients' expectations, and working in a multi-agency setting. In particular, while mechanisms for a more coordinated humanitarian response are in place at the IRC, the improvement of referral and interagency systems is paramount to address communities' needs and the achievement of CHS Commitment 6, which calls for a more coordinated and complementary humanitarian response.

⁷⁰ See Lewis, G. & Lander, B. (2011). Only as strong as our weakest link: can the humanitarian system be collectively accountable to affected populations. Humanitarian Exchange, Special feature: *Humanitarian Accountability*, 52, ODI, 8-10. See also UNHCR. (2017). *Feedback Mechanisms in the Former Yugoslav Republic of Macedonia*.

⁷¹ See CHS Alliance. (2020). Humanitarian Accountability Report. Are we making aid working better for people affected by crisis?; and CHS Alliance. (2018). How Change Happens in the Humanitarian Sector. Geneva: CHS Alliance; Metcalfe-Hough, V., Fenton, W., Willitts-King, B. & Spencer, A. (2020). Grand Bargain annual independent report 2020. Humanitarian Policy Group, London: ODI.

5.CLIENT RESPONSIVENESS AND STAFF CULTURE

This chapter discusses how the IRC can influence staff culture to foster greater receptivity to client responsiveness, and how to incentivise staff to contribute to a more effective use of client feedback in programmatic decisions.

5.1 RECRUITMENT, TRAINING AND PERFORMANCE MANAGEMENT

The 2018 Humanitarian Accountability Report discusses improvements that the humanitarian sector could implement to promote greater AAP.⁷² The report stresses the importance of training, coaching and general support for staff, as well as changing of decision-making structures to enhance affected populations' participation in programme design.⁷³

At the IRC, training is one way to support the implementation of the Client Responsive Programming Framework. Data from the survey reveals that 18 out of 30 staff respondents received training on client responsiveness and found it useful. Some respondents did not receive any training because it was not available. The majority of staff respondents, across levels of seniority, indicated a willingness to learn and to improve their practices. Field officers, in particular, indicated that they would appreciate training on how to collect feedback, engage clients, close the feedback loop and manage clients' expectations. Staff interviewed also stressed the need for more customer care skills to engage communities served.

As the interviews with staff revealed, training on client responsiveness is not offered to everyone and is reserved for select members of staff, such as focal points. Focal points are then supposed to cascade relevant information to the rest of field officers. However, the fact that not all staff at IRC Tanzania have taken part in training may indicate that this transfer of information is an area that needs further development.

⁷² CHS Alliance. (2018). *How Change Happens in the Humanitarian Sector,* especially pp. 36-39.

⁷³ Bonino F., Jean, I. & Knox Clarke, P. (2014). Closing the Loop - Practitioner guidance on effective feedback mechanisms in humanitarian contexts, p. 25.

Beyond training, recruitment and performance appraisals also play an important role in nurturing a client-responsive organisational culture. Key relevant soft skills include empathy, listening, facilitation, inclusiveness and cultural sensitivity, and these should be included in job descriptions (see 'Good practice: Recruitment and performance appraisal').

From the sources reviewed for this report, it is unclear if recruitment and performance appraisal practices were consistently applied across all sectors (e.g. updating job descriptions to accommodate AAP). All sectors should endeavour to include specific skills and targets in relation to client responsiveness in order to recruit suitable staff and nurture a client-responsive organisational culture.

GOOD PRACTICE: RECRUITMENT AND PERFORMANCE APPRAISAL

In order to ensure staff embrace a clientresponsive culture, the CYPD sector recently reviewed job descriptions to include essential skills in relation to client responsiveness. New job descriptions can inform the recruitment of new members of staff and help setting targets for staff performance.⁷⁴

Such changes, alongside targeted onboarding practices that stress the importance of client responsiveness and feedback mechanisms, can help ensuring client feedback is adequately collected, recorded, used and responded to.

5.2 INCENTIVES FOR STAFF TO BE CLIENT-RESPONSIVE

This evaluation considered factors that enable or discourage staff to employ client responsiveness. Staff identified factors that may prevent client feedback from being integrated into their work and programming. These include: lack of financial and human resource (12) and lack of relevant training (11). Ten members of staff also indicated that feedback was not included in their work because other priorities took precedence.

This later point, in particular, suggests that the collection, recording and use of client feedback may not be perceived as part of their job priorities, but as a task that is separate from the assistance and services they provide clients. To address this issue, the IRC could extend training to all staff, especially those who have daily contact with clients and are supposed to collect, record and respond to client feedback, and ensure job descriptions and performance targets are adjusted to include client-responsive skills and practices.

The most cited factors that could instead enable staff to more effectively engage clients in decisionmaking include: the use of information and communication technology (16); more financial and human resources (15); more training (13); the inclusion of client responsiveness in performance evaluation (13); being rewarded and recognised for their work (8); a better definition of roles and responsibilities (8); more support and leadership from senior management (7). While some improvement has been achieved through the rolling out of CommCare that facilitates the collection and recording of feedback (see section 3.1), some of these suggestions can be addressed by strengthening HR practices on recruitment and performance management and applying them across all sectors.

It is worth noting that staff responses on enabling and discouraging factors often mentioned human and financial resources and training as key for the employment of a client-responsive approach. Additional resources and training for all staff should be considered when applying for future funding calls.

⁷⁴ Interview with Christina Mdemu (CYPD Coordinator).

TIP: ENCOURAGING A CLIENT-RESPONSIVE CULTURE

In order to promote a feedback culture and AAP, humanitarian organisations could take some concrete steps. These include:

- Implementing an open-door policy for senior members of staff so that they could better support the work of colleagues on the field in assisting clients, and collecting and recording feedback;
- Providing field officers with feedback on their performance;
- Implementing opportunities for peer-topeer learning whereby staff can share their best practices and also practices that were less effective;
- Implementing rotation opportunities so that staff are exposed to different roles (e.g. recording feedback) and tasks involved in handling and using feedback, and in maintaining a good feedback mechanism;
- Ensuring that staff perceive the organisation as one where feedback is welcomed by allowing individuals to provide feedback on and discuss the organisation's policies and practices. Staff would then be more likely to apply similar support and appreciation of feedback to affected populations.⁷⁵

Staff interviewed indicated that support from managers, coordinators and supervisors as well as staff meetings are particularly important to help implement more client-centred programming. In these conversations, staff can discuss client feedback and understand how to respond or incorporate it into programming. Staff recognised that one-to-one meetings with senior members of staff are particularly important to support less experienced colleagues, especially in handling negative feedback, and to help colleagues build the skills and knowledge necessary to perform their roles (see 'Tip: Encouraging a clientresponsive culture').

5.3 CONCLUDING REMARKS

Findings suggest that, while staff seem to apply client responsiveness and understand its principles, organisational culture should be further nurtured to achieve international AAP standards and greater client participation in decisionmaking. This can be done through training for staff at all levels, and the improvement of HR practices in relation to recruitment and performance appraisal, including the use of induction and orientation sessions which focus on client responsiveness.

This can help staff understand that humanitarian assistance cannot be reduced to a mere service delivery and case management, and that AAP is an integral part of their role. Staff must be aware of the reasons why feedback is collected, recorded and used, and of the potential negative consequences on their jobs and the organisations they work for if a client-responsive approach is not applied. As funding is increasingly dependent on humanitarian organisations' engagement with and involvement of affected populations in programmatic decisions – as promoted by the Grand Bargain – it is paramount that staff embrace client-responsive practices that enhance clients' participation in the provision of humanitarian assistance.

⁷⁵ Adapted from tips included in Bonino F., Jean, I. & Knox Clarke, P. (2014). *Closing the Loop - Practitioner guidance on effective feedback mechanisms in humanitarian contexts*, p. 26, and Bonino, F. with Jean, I. & Knox Clarke, P. (2014). *Humanitarian feedback mechanisms: research, evidence and guidance*.

6. CONCLUSIONS

6.1 KEY TAKE-AWAYS

The evaluation shows that the IRC has developed and is implementing policies that aim to achieve global humanitarian accountability standards. The Client Responsive Programming Framework, in particular, aims to implement CHS Commitments 4 and 5, which focus on communication with and participation of clients in decision-making, and setting up responsive mechanisms to handle complaints.

In line with these commitments, findings indicate that IRC Tanzania country programme shares information with affected populations, has set up complaint-handling processes and accessible feedback mechanisms, and has paved the way for the creation of an organisational culture which welcomes feedback and complaints. Staff who took part to the study generally valued client feedback and acknowledged that programme quality improves when client feedback is incorporated in decision-making.

All sectors considered - CYPD, Education, Health, PRoL and WPE – apply the Client Responsiveness Programme Framework and use relevant tools to collect, record, analyse and use client feedback. All sectors provided examples of good practice and how client feedback has been used to inform programmatic decisions.

The evaluation indicated that, when feedback has been duly recorded, the feedback loop is generally closed. Closing the feedback loop is a key aspect of a client-responsive approach. As it emerged in clients' responses to the survey and FGDs, it helps building and maintaining trust, and is an incentive for clients to keep engaging with humanitarian organisations, which is pivotal for the overall improvement of the humanitarian assistance.

While IRC Tanzania is making good progress towards the realisation of international AAP standards, the study highlighted that the implementation of a client-responsive approach presents some crucial challenges, such as contextual limitations derived from the host



🧿 Congolese refugees collect their monthly food aid at a distribution centre in Nyarugusu refugee camp, Tanzania. 🖾 UNHCR/Georgina Goodwin

country's policies and working in a multi-agency setting. The latter, in particular, is key for the realisation of CHS Commitment 6 (*Humanitarian response is coordinated and complementary*) and depends on the successful application of AAP principles by all humanitarian actors involved. While the achievement of CHS Commitment 6 remains outside of the IRC's sole responsibility, findings from the evaluation indicate that IRC Tanzania is adopting adequate practices to enhance cooperation and collaboration with partners.

Though contextual limitations are beyond IRC Tanzania's control, other challenges identified by this report can be addressed within the country programme. Despite the commitment to strengthen clients' participation in programmatic decisions, IRC Tanzania programmes generally tended towards the consultation phase of the IAP2 Spectrum of Public Participation. This means that after providing feedback, clients are left out of decisions over adaptations and shaping programming. Greater client participation in programmatic decisions must be promoted to achieve AAP standards as promoted by the CHS commitments and the Grand Bargain Participation Revolution.

However, before moving towards a greater involvement of affected populations in programmatic decisions, clients must first know what feedback and complaint mechanisms are in place, why their feedback is collected and how it is going to be used. Only 54.5% of clients surveyed in September 2020 were aware of feedback mechanisms and staff suggested that clients may not fully appreciate the purpose of feedback mechanisms. Sensitisation initiatives with clients can better prepare communities to participate in the feedback process. Findings from the evaluation suggest that recording client feedback was one of the main challenges. Failure to record feedback can have negative impact on the closure of the feedback loop, on clients' trust in humanitarian organisations' ability to listen, and on humanitarian organisations' ability to analyse feedback and make the necessary programmatic changes to make aid more relevant and effective. This is an area that needs urgent attention.

Recording feedback can be supported through a greater investment in client responsiveness. While clients' awareness of feedback mechanism and their purpose is important, the effectiveness of feedback mechanisms also depends on staff's knowledge of feedback systems and workings, and the reasons to collect, record and use client feedback. Greater support for staff to ensure the recording of feedback can come from training, and the inclusion of client responsiveness skills and targets in recruitment and performance appraisal practices. Coaching and peer-to-peer learning opportunities can also nurture a client-responsive culture.

The report shows that IRC Tanzania is making good progress in relation to CHS Commitments 4, 5 and 6, and the Grand Bargain Participation Revolution. Greater investments in clientresponsive training, supporting structures for staff and sensitisation materials for clients on feedback mechanism can certainly help staff apply client responsiveness in their daily practices and to manage clients' expectations.

6.2 RECOMMENDATIONS

FOR THE IRC AND HUMANITARIAN ORGANISATIONS

Reviewing IRC Tanzania's approach to client responsiveness highlights challenges and opportunities to enhance AAP and strengthen client participation in decision-making. These recommendations, which can also apply to other humanitarian organisations more broadly, include:

- Conduct regular awareness raising activities of feedback mechanisms among clients by developing additional sensitisation materials and/or incorporating this in the project materials, where possible. Materials should clarify what feedback is and how it can be provided. They should also raise awareness of clients' right to influence programmatic decisions over services that affect their lives;
- Once communities served are more aware of feedback mechanisms and have a clearer understanding of how they can use them and what they can expect, develop mechanisms to move from consultations (whereby feedback is collected from clients but then interpreted and acted upon by IRC staff only) to involvement of clients in decision-making. Existing mechanisms of engagement can be used. Rather than conducting FGD or listening sessions to simply extract information, use these occasions to discuss options on programme changes and adaptation. With time, these groups may be able to become working groups that advise the IRC and humanitarian organisations on changes and design for existing and future programming;
- Prioritise the inclusion of people with disability and marginalised groups by setting up more regular meetings/FGDs/ working groups in different zones of refugee camps so that these groups may have a chance to provide feedback collectively and across different programmes when mobility is a problem;

- Set up mobile helpdesks which can increase the opportunities for people with mobility limitations to provide feedback individually. This is particularly important when dealing with sensitive feedback and when clients without phone access wish to communicate directly with IRC staff without having to go through community leaders or incentive workers;
- Enhance information provision to tackle difficulty in accessing services and clients' perception of biased service delivery: Use different channels (e.g. community dialogues, community leaders) to increase communications on service delivery. The IRC should more clearly explain who the services are for, the criteria to receiving services, when and where they can access them;

TO FOSTER GREATER RECEPTIVITY TO CLIENT RESPONSIVENESS AMONG STAFF

Ensuring that feedback is collected, duly recorded, analysed and used is fundamental for a clientresponsive programming, but the conditions that allow staff to action it must be created and nurtured.

- Better define roles and responsibilities regarding client responsiveness so that collecting and recording feedback is not perceived as 'add-on' but as part of everyone's core responsibilities. Include client-responsive tasks (such as recording feedback or valuing clients' opinions) and skills (e.g. listening, empathy) in job descriptions and in the definitions of performance targets;
- Managers should continue supporting staff in technical aspects related to client responsiveness such as collecting, recording and responding to client feedback. They should help staff find their own strategies to manage the workload and record feedback;

- Develop training in customer care skills that could support staff in communicating with clients, managing their expectations and handling negative feedback, and consider extending client responsiveness training to all staff that are in touch with clients in their daily activities;
- Consider implementing rotation opportunities so that staff are exposed to different roles (e.g. recording feedback) and tasks involved in handling and using feedback.

6. CONCLUSIONS









