



Evaluation of IOM Accountability to Affected Populations

**IOM CENTRAL EVALUATION
December 2024**

ACKNOWLEDGEMENTS

This report outlines the background, findings, and recommendations resulting from an evaluation of IOM accountability to affected populations (AAP), carried out by Nike Consultoria Ltda on behalf of the IOM Central Evaluation Division (CED), the Office of Internal Oversight (OIO). The team of consultants was led by Team Leader Melissa Andrade Costa, and included Mehret Habte, who oversaw the Ethiopian case study.

Both the IOM CED and the consultants would like to extend their sincere gratitude and appreciation to all those who contributed valuable time and insights to the evaluation, including the representatives of donors, UN agencies, international NGOs, and IOM staff and managers at all levels of the Organization.

Special appreciation is extended to IOM AAP staff and managers for their thoughtful reflections, and to the contributors for the two case studies from Ethiopia and Türkiye, both conducted in person.

Final responsibility for the overall conclusions and the recommendation in this report lies with the IOM CED.

IOM Central Evaluation Division

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LIST OF ACRONYMS

CFM	Complaints and Feedback Mechanism
AAP	Accountability to Affected Populations
IAAWG	Inter-Agency Accountability Working Group
CCCM	Camp Coordination and Camp Management
CED	Central Evaluation Division
DAC	Development Assistance Committee
DHRR	Department of Humanitarian Response and Recovery
DIPS	Dialogue, Information and Participation System
DTM	Displacement Tracking Matrix
FGD	Focus Group Discussion
GBV	Gender-Based Violence
IASC	Inter-Agency Standing Committee
IDP	Internally Displaced Person
IOM	International Organization for Migration
KII	Key informant interview
LGBTIQA+	Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Asexual and Other
MEAL	Monitoring, Evaluation, Accountability and Learning
MOPAN	Multilateral Organisation Performance Assessment Network
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OECD	Organisation for Economic Cooperation and Development
PSEAH	Prevention of and Response to Sexual Exploitation and Abuse and Sexual Harassment
SOP	Standard Operating Procedure
SRF	Strategic Results Framework
UNEG	United Nations Evaluation Group
UNICEF	United Nations Children's Fund
UNFPA	United Nations Population Fund
WASH	Water, Sanitation and Hygiene
WHS	World Humanitarian Summit

EXECUTIVE SUMMARY

This external evaluation assessed whether or not IOM is delivering on its commitments to accountability to affected populations (AAP),¹ following findings from the [2023 MOPAN assessment](#) indicating that the Organization has not yet been able to consistently incorporate AAP across all its programmes, and did not invest adequately in AAP, considering the scale of its operations. In addition to a review of both internal and public documents related to AAP, data collection methods included consultations with a relatively large number of individuals (IOM staff members, predominantly), through key informant interviews (KIIs), focus group discussions (FGDs) and an online survey. The findings mainly reflect the perceptions of the individuals consulted, rather than being based on technical assessments of specific aspects of AAP work, as these were beyond the scope of this evaluation.

The main object of analysis was the overall IOM AAP Framework (constituted by Instruction 285 (IN/285) and the body of guidance and resources available to guide and support AAP activities) and the activities implemented by the AAP Coordination Unit in Headquarters to implement the AAP policy. AAP activities implemented at a country office level were not systematically reviewed, except for two case studies on AAP implementation, in IOM Ethiopia and IOM Türkiye. Findings on decentralized activities are therefore based on these two case studies and from the examples provided by the individuals consulted, which combined form a partial representation of decentralized AAP implementation in IOM.

The key findings of the evaluation are:

- **The IOM AAP Framework is highly relevant, generally coherent and solidly centred around Instruction 285**, with the caveat that its focus on emergency operations leaves many unclear on the mandatory nature of AAP in non-emergency contexts, where AAP principles are felt as equally applicable and where AAP-related activities are already being implemented.
- **Resources allocated to central AAP functions remain inadequate.** The AAP Coordination Unit is largely funded with earmarked funds and staffed by ungraded staff or consultants. Resources available are generally deemed to be insufficient to meet the demand for learning and to proactively support IOM country offices. Informants overwhelmingly indicated that more practical resources and hands-on support are needed for effective and efficient AAP implementation at the field level.
- **There is no formal strategy, plan, or monitoring and evaluation framework to guide the implementation of AAP from a central level.** AAP is currently monitored through a collection of indicators included in the IOM Strategic Result Framework and its related plan. These indicators have recorded significant growth in recent years, but they are not assessed against clear targets, they focus on outputs and very broadly defined outcomes, and they do not collectively constitute a robust policy monitoring

¹ IOM follows the IASC definition of AAP, which describes AAP as “an active commitment to use power responsibly by taking account of, giving account to, and being held to account by the people humanitarian organisations seek to assist” (IASC, 2015).

framework. There is clear progress in the implementation of AAP within IOM, but any claim of “AAP mainstreaming” within the Organization cannot be reasonably demonstrated.

- **At a decentralized level, there are examples of IOM being able to set up articulated systems and initiatives that promote AAP, with tangible effects on operations.** However, sustaining and scaling up these initiatives is challenging. AAP implementation at the level of IOM country offices is predominantly undertaken in the context of specific projects or thematic areas. This may often lead to a “fragmented approach” where solutions and activities implemented in one area are not necessarily replicated or extended to other relevant ones. The case of IOM Ethiopia stood out as an important attempt at “institutionalising” AAP in the country office structure, as well as devising a mechanism to fund AAP activities from all ongoing projects in the mission.
- **There are known gaps that reduce the effectiveness and efficiency of activities promoting AAP at a decentralized level.** These include a lack of full integration of AAP into the IOM project cycle; a lack of standard solutions and technical resources for the development and management of complaint and feedback mechanism (CFM) systems; a lack of technical resources and support to make full use of data gathered from affected people; and, finally, a lack of capacity to engage with other actors to promote “collective accountability”.

In conclusion, the evaluation largely confirms the findings from the 2023 MOPAN assessment, while also drawing a more nuanced and detailed picture of how IOM is pursuing its institutional commitments regarding AAP. Nine recommendations are put forward for IOM senior management and for the AAP team, to address the gaps identified:

1. Clarify that the scope and applicability of AAP extends beyond emergency response operations, reinforcing also the message on the mandatory nature of IN/285.
2. Develop an operational medium- to longer-term strategy for AAP, to be negotiated at the highest leadership level, with a three-year plan connected to a funding strategy.
3. In conjunction with Recommendation 2 (develop an AAP strategy), develop a theory of change and a dedicated monitoring and evaluation framework for AAP.
4. Strengthen central AAP functions, ensuring that the size of the AAP unit in IOM Headquarters becomes adequate to meet AAP strategic objectives and that there is capacity to proactively support country offices to structure their approach to AAP implementation.
5. Support country offices in developing office-wide approaches to AAP implementation and funding, reducing fragmentation.
6. Increase the visibility of AAP activities, both internally and externally, on the basis of a clear visibility and knowledge management plan.

7. Increase training opportunities and update capacity-building material with increased focus on practical AAP implementation and including standard tools and templates, which will have been developed in consultation with relevant field offices, partners and community of practice members.
8. Map CFM systems in use in IOM, through establishing minimum standards and quality control systems, developing and disseminating dedicated guidance material, and standardizing CFM systems and their integration into corporate systems.
9. Continue collaboration and engagement on collective accountability, actively participating in coordination structures on AAP, such as IASC-promoted initiatives or initiatives developed in other inter-agency coordination spaces, both at the global and country level.

1. BACKGROUND

This report details the findings from an external evaluation of the IOM strategy for AAP carried out between November 2023 and June 2024.

Evaluation Context

IOM follows the IASC definition of AAP, which describes it as “an active commitment to use power responsibly by taking account of, giving account to, and being held to account by the people humanitarian organisations seek to assist” (IASC, 2015). Since the 1990s, the AAP agenda has significantly expanded within the humanitarian response field. It has evolved through the humanitarian reform process that followed the [IASC Humanitarian response review](#) (2005), the [IASC Transformative Agenda](#) (2011), the [World Humanitarian Summit](#) (WHS) (2016) and the IASC [Grand Bargain](#) platform (2016). These changes have all contributed to emphasizing the needs, perspectives and rights of affected people rather than viewing them as merely the passive recipients of assistance.

In 2020, IOM introduced the AAP Framework, which became a mandatory instruction (IN/285) in 2021. This framework was created following guidance from IASC. Furthermore, activities related to AAP were tracked in several pilot countries over three years to help define the framework and monitor the implementation. Türkiye was one of these pilot countries.

Within the IOM organizational framework, the responsibility for AAP initially fell to the Department of Operations and Emergencies, which was recently restructured into the Department of Humanitarian Response and Recovery (DHRR). This department was assigned the first global coordination focal point. In 2024, by decision of the IOM Director General, responsibility for AAP was transferred to the Protection Division. At the time of writing this background, the AAP Coordination Unit, comprising four team members, operated within the Protection Division.

As outlined in the AAP Framework, “IOM’s foundation for action on AAP is firmly rooted in several key IOM strategic documents.... The AAP Framework brings these provisions together for a consolidated institutional approach” (IOM, 2020c:6). These key strategic documents include the Migration Crisis Operational Framework (MC/2355), the Humanitarian Policy (C/106/CRP/20) and the Gender Equality Policy (C/106/INF/8/REV.1).² The obligatory aspect of the AAP Framework means that all forthcoming policies and guidelines “must adequately represent and take the IOM AAP Framework into account” (IOM, 2020c:6). The AAP Framework outlines five objectives aimed at enhancing the IOM approach to AAP and integrating it into IOM actions. These objectives focus on leadership; information-sharing and transparency; participation; complaints and feedback mechanisms; and partner coordination. The AAP Coordination Unit is tasked with promoting and overseeing AAP activities within the Organization, as well as representing IOM in pertinent AAP forums. Their activities include

² Other documents include the Standards of Conduct (IN/15, REV. 1), the Policy and Procedures for Preventing and Responding to Sexual Exploitation and Abuse (IN/234), the IOM Data Protection Principles (IN/00138), the guidance note on how to mainstream protection across IOM crisis response (IN/232), and the IOM Reporting and Investigation of Misconduct Framework (IN/275).

developing normative guidance, creating toolkits, conducting training sessions, providing technical support, disseminating information, managing knowledge and establishing an internal AAP community of practice.

The AAP Coordination Unit is tasked with monitoring AAP implementation within IOM. It coordinates data collection and consolidation for the assessment of these indicators. Informants from within the unit stated that qualitative data collection was also being carried out to complement these quantitative indicators. The quantitative and qualitative data collected were analysed and presented against a definition of the four main areas of activity related to AAP: to provide information to affected people; to encourage and enhance participation from affected people; to establish and use feedback mechanisms to improve programming; and to participate in inter-agency AAP coordination spaces.

Assessing progress and impact in the realm of AAP is inherently complex due to the cross-sectional nature of the AAP Framework; this is a challenge encountered not solely by IOM but also across the broader humanitarian sector. To tackle this issue, IASC has established a working group tasked with developing standard indicators for AAP in humanitarian contexts.³

Evaluation Purpose, Objectives and Scope

IOM, through CED, decided to carry out a strategic and thorough evaluation of its efforts and accomplishments in the area of AAP. This evaluation is part of the CED 2023–2024 [Biennial evaluation workplan](#), and is considered an aspect of a larger institutional initiative to ensure that AAP commitments are fulfilled. The aim of this evaluation was to provide recommendations for actions at various levels, based on a general review of AAP within IOM.

In particular, the evaluation concentrated on:

- IOM global engagement with AAP in both emergency and non-emergency situations, covering policies, strategies and programmatic methods established since 2016 (that is, before the launch of the AAP Framework).
- Best practices and opportunities for improvement regarding IOM decision-making, policy formulation, technical guidance and programme execution for a holistic and cooperative AAP approach, as well as to ensure external alignment with United Nations agencies, other organizations and governments.
- The progress on implementing the 2019 MOPAN recommendations related to AAP and IASC commitments, especially in light of the 2023 MOPAN review of IOM.
- Field-based examination of IOM contributions to regional and national projects and community-based approaches to AAP.
- Activities conducted within the IASC task force and other groups.
- The comparative advantage of IOM in system-wide, strategic solutions and responses, and how sustainability can be further improved.

³ As reported during interviews in the inception phase.

The evaluation did not focus on the implementation of AAP within specific projects. Instead, it examined AAP activities worldwide based on aggregated data from national, regional and global levels.

The intended audience for this evaluation includes IOM management, IOM staff engaged in implementing the AAP approach at Headquarters and in the field, interested donors, Member States and both international and local partners.

The evaluation employed the six standard criteria of the OECD Development Assistance Committee: relevance, coherence, efficiency, effectiveness, impact and sustainability (OECD, 2024). It also incorporated an analysis of the cross-cutting themes of gender, disability, environment and human rights-based approaches, as they intersected with AAP within IOM. The complete list of evaluation questions can be found in Annex A.

Methodology

A mixed methods approach was implemented for this exercise. The triangulation of various data sources was crucial in achieving consistent and valid evaluation findings. Triangulation involves assessing multiple data sources to compare differing perspectives and ensure reliability when reporting evaluation findings, accounting for diverse viewpoints and supporting conclusions with robust evidence. The resources gathered for this exercise encompassed official IOM documents, feedback from participants at IOM and partner organizations, at local government levels, from within affected populations and from civil society organizations, where relevant, such as in the case studies.

Data Sources

The data for this evaluation were gathered using several methods: desk reviews; key informant interviews (KII); focus group discussions (FGDs); a global survey; and two case studies on AAP implementation in Ethiopia and Türkiye.

Figure 1. Methods for data collection



Desk Review

The desk review examined key background documents related to IOM (including the strategic review of its results-based management work (IOM 2023g), the 2023 MOPAN assessment, and various IOM manuals addressing protection and reintegration, among others), as well as documents specifically related to AAP work (such as the AAP Framework, tools on information, participation and complaints mechanisms, and annual reports) and information on specific selected countries (Ethiopia and Türkiye). Throughout the entire evaluation process, there was

a continuous examination of pertinent documents as new evidence emerged, necessitating further research into particular issues and questions. For a compilation of the reviewed documents, refer to the Bibliography.

Remote and In-Person Key Informant Interviews

An initial list of informants to be interviewed was received from IOM, to which additional individuals were added based on the consultations that took place to produce this evaluation's inception report. The final list included IOM staff at various levels (Headquarters, regional and national), as well as individuals from partner organizations. All interviews with IOM informants in Headquarters were conducted remotely through Zoom and generally lasted between 45 and 60 minutes. For the case studies, the interviews were conducted in person. Government officials and partners at the local level were interviewed for the case studies, in addition to IOM staff and partners in the relevant IOM country offices.

Focus Group Discussions

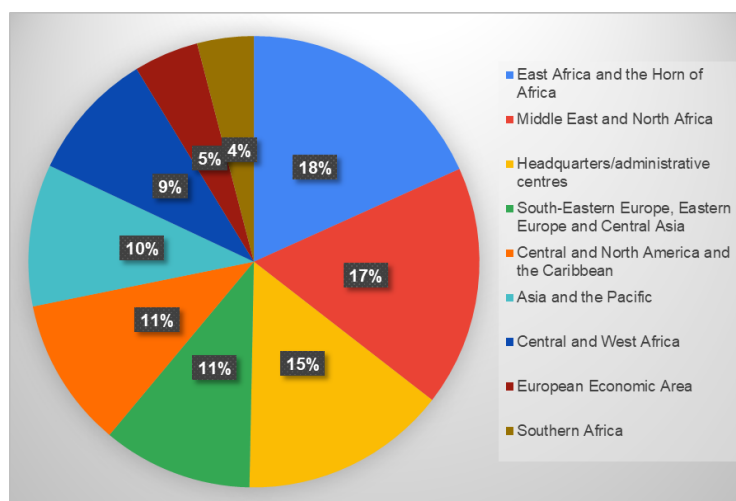
FGDs were conducted to facilitate debate, allowing the observation of power dynamics, consensus and disagreements on critical topics of interest. The three groups engaged were: IOM staff; representatives from affected people and from civil society organizations at the local level; and IOM local partners from the case studies.⁴

Online Survey

The survey was conducted alongside the FGDs and the KIIs. Its purpose was to complement those other sources of information, primarily by offering points for triangulation, especially in identifying trends through the wider range of participants made possible by this method. Figure 2 illustrates the distribution of the 214 survey respondents across IOM administrative zones. Survey data eventually found limited use in the evaluation due to issues with the formulation of the questions. The results from the survey included in the main body of the report are deemed as the most reliable ones, although their interpretation is caveated.

⁴ The respective scripts used for the FGDs with each group type can be found in Annex B.

Figure 2. Survey respondents according to their work location



Source: Evaluation survey.

Case Studies

Two case studies were conducted as part of the evaluation to provide practical examples from the field regarding the implementation of the AAP Framework. The IOM country offices selected for these case studies were Ethiopia and Türkiye, based on specific criteria. The IOM presence in Ethiopia is one of its largest, including a country office in Addis Ababa, 14 field offices, as well as Migration Response Centres, migration health assessment clinics and transit centres. It has a highly articulated operational and political setup, encompassing both crisis and non-crisis situations. Within IOM, IOM Ethiopia is considered as having a significant or even comprehensive AAP portfolio. IOM Türkiye was selected because Türkiye was one of the “pilot countries” in which the AAP Framework was initially tested. Additionally, IOM Türkiye makes an interesting case because it applied AAP approaches to cross-border operations with Syria in ways that were seen as innovative.

The analysis of the case studies followed the same evaluation criteria as the overall exercise. Interview guides for the case studies were adapted from those used in interviews with IOM staff in other regions, to maintain consistency in the investigation of the primary themes. Data collected regarding the case studies were qualitative, obtained through observations, interviews and focus group discussions. These case studies aimed not to generalize experiences but to identify effective and ineffective practices, understand how information was being communicated from IOM Headquarters, and map out lessons learned. The two case studies were valuable because the experiences of those involved in them were in some ways different and in others similar, adding depth and specificity to the global findings. They effectively illustrated the results gathered from global surveys and interviews with IOM staff at various levels (national, regional and global).

Sampling

In the inception phase, the evaluation examined the views of IOM staff with a key role or a vested interest in AAP to identify crucial informants for primary data collection. Purposive

sampling was selected for the case studies, to ensure comprehensive data gathering. Additionally, during the data collection phase, further relevant potential interviewees were identified through snowball sampling, a method that locates additional key respondents during interviews with initial informants. Table 1 represents the number of respondents targeted by primary data collection methods.

Table 1. Data collection methods and number of respondents consulted

Category	Number of individuals consulted
Key informant interviews	34 informants
Focus group discussions	30 participants
Interviews and focus group discussions in the two case studies	132 informants/participants
Survey	214 respondents

Limitations

Time constraints prevented all evaluation questions and perspectives from being examined with the same level of detail. The evaluators had a limited number of days to review the information, and the informants faced time and workload challenges in providing comprehensive responses and clarifications. As a result, not all of the evaluation questions could be addressed fully.

Among the six OECD evaluation criteria, “impact” received less focus due to the difficulty of measuring it across the various AAP policies, guidelines and initiatives. Furthermore, the theory of change was a challenging concept to elucidate because of insufficient input from relevant internal respondents, and it was therefore recommended for follow-up by the AAP Coordination Unit.

The evaluation team intended to interview key senior management members at IOM Headquarters, but the designated officers were unavailable. This limitation affected the inclusion of central-level senior officials’ perspectives in the findings and recommendations. Participation from senior management members in IOM country offices was, however, satisfactory.

Ultimately, another difficulty faced was the limited involvement of the AAP Coordination Unit in the evaluation process. This issue might stem from the fact that, at the time of this evaluation, an organizational restructuring process was ongoing. Moreover, this evaluation was commissioned by the CED, rather than the AAP Coordination Unit, potentially making it seem to the AAP Coordination Unit an unforeseen additional burden on already strained staff resources. Furthermore, some key IOM officers, who had been directly involved with developing the AAP Framework and coordinating related activities, had since moved to other roles, rendering them either unavailable or less available to discuss the findings and recommendations and to provide timely, detailed thematic feedback. Given factors such as the time constraints, the limited access to both senior management and AAP Coordination Unit

officers, and the scope of the evaluation not including more robust methodologies such as counterfactual and statistical techniques, this evaluation is often only able to identify perceived weakness and strengths, rather than being able to evaluate actual weaknesses and strengths. In such areas, the evaluation should be understood as inviting further analysis and assessment, which the authors highly encourage IOM to undertake.

Ethical Considerations

The evaluation adhered to the ethical guidelines established by the United Nations Evaluation Group (Table 2).

Table 2. United Nations Evaluation Group ethical guidelines for evaluations

Ethical principle	United Nations Evaluation Group definition
Integrity	Strict commitment to ethical principles and professional standards is crucial for responsible evaluation practices.
Accountability	The duty to be accountable for all decisions and actions, uphold commitments without exception, and report any observed or potential harms through proper channels.
Respect	Interacting with all evaluation stakeholders in a manner that respects their dignity, well-being and personal agency, while also being considerate of their sex, gender, race, language, country of origin, LGBTQIA+ status, age, background, religion, ethnicity and ability, as well as cultural, economic and physical environments.
Beneficence	Aiming to benefit people and the environment while reducing any negative impacts that might result from evaluation processes.

Source: United Nations Evaluation Group (2020).

In addition to following the aforementioned principles, the evaluation team implemented the following steps:

1. Informing all consulted stakeholders that their participation was part of an evaluation aimed at enhancing overall IOM work rather than assessing needs or gathering information for current or future interventions.
2. Clarifying to interlocutors that the evaluators were independent professionals, not IOM officers, and assuring them that any shared information would be anonymized when integrated into findings and recommendations.
3. Exercising significant caution and respect during FGDs with groups experiencing conflicts due to diverse ethnic and national identities.
4. Referring any assistance requests received from affected persons during FGDs or other interactions to the relevant IOM officer.
5. Attentively listening to field stakeholders' significant concerns and referring these to the CED as appropriate.

2. EVALUATION FINDINGS

Relevance

Evaluation questions and themes for the “relevance” criterion:⁵

- EQ1. To what extent is IOM’s AAP approach relevant and aligned with the needs and priorities of IOM Member States and the United Nations system (IASC commitments in particular), and of the affected populations and beneficiaries IOM assist?
- EQ2. Are IOM’s AAP mechanisms and guidance relevant for IOM offices to enable programming and implementation of AAP in its interventions?
- EQ3. How does IOM’s AAP approach consider IOM cross-cutting issues of human rights, gender equality, disability and environment?⁶
- EQ4. To what extent were “relevant marginalized groups” defined/identified by rights-holders themselves?
- EQ5. Are there institutional comparative advantages for AAP approach, which can be identified in the Organization’s mandate, to support further advancement in the fields of AAP?
- EQ6. What mechanisms are in place to guarantee that the design and implementation of IOM interventions address power dynamics between affected populations and local and international entities?

Finding 1.1. The IOM AAP Framework is consistent with general United Nations guidance and IASC policies, and there is evidence that affected people were involved in the framework’s development. However, the alignment with Member States’ perspectives remains unclear, as this aspect was not emphasized during the development of the framework.

This evaluation found that the IOM AAP Framework (IN/285) aligns with IASC guidance (as well as with similar frameworks in place in other entities), through desk review and informants consulted on the matter. The development of the framework entailed thorough reviews of IASC policies and other relevant IOM policies, with the aim of achieving substantial conceptual and theoretical consistency with them.⁷ Some informants also identified that the framework is also relevant to the implementation of the “We Are All In”⁸ reporting platform (a flagship initiative in IOM), as it contributes to raising awareness about reporting mechanisms.

⁵ The full list of evaluation questions, together with indicators, collection methods and data sources, can be found in the evaluation matrix (Annex A). Evaluation questions are reproduced directly from the terms of reference of the evaluation.

⁶ This list of cross-cutting issues was provided by IOM in the terms of reference for the evaluation; thus, the evaluation does not address how the IOM AAP approach intersects with other cross-cutting issues such as the rights of gender non-binary migrants, children or the elderly, linguistic or cultural minorities.

⁷ IOM policies and guidelines considered as relevant for or related to IN/285 include the IOM Migration Crisis Operational Framework (MC/2355), the IOM Humanitarian Policy – Principles for Humanitarian Action (C/106/CRP/20), the IOM Standards of Conduct (IN/15, Rev. 1), the IOM *Guidance note for mainstreaming protection in IOM crisis response* (IN/232), the IOM *Policies and Procedures for Preventing and Responding to Sexual Exploitation and Abuse* (IN/234), the IOM Gender Equality Policy 2015–2019 (C/106/INF/8/Rev.1), the IOM Data Protection Principles (IN/00138) and the IOM Reporting and Investigation of Misconduct Framework (IN/275).

⁸ The [We Are All In](#) reporting platform is a tool that sends confidential, encrypted reports on different types of misconduct and wrongdoings (including sexual exploitation, abuse and harassment) to the IOM Office of Internal Oversight (OIO).

Informants confirmed that the development of the AAP Framework did not significantly involve Member States. The perspectives of Member States were not sufficiently explored for this evaluation to determine if alignment exists or not. However, IOM informants reported that a total of 225 affected persons, from different countries, participated in the consultation phase of the AAP Framework, prior to its piloting in 2018.

IOM staff noted during interviews and in the survey that local communities may not always recognize the advantages of feedback mechanisms, or that there may be some cultural barriers to providing feedback. For example, one informant described how, in some contexts in Myanmar, giving negative feedback on assistance received may be avoided so as not to “show lack of gratitude”. Staff attempt to convey that the assistance provided is an entitlement; however, obtaining open and candid feedback may be difficult in such contexts, meaning that any application (and assessment) of AAP needs an awareness of culturally appropriate approaches.

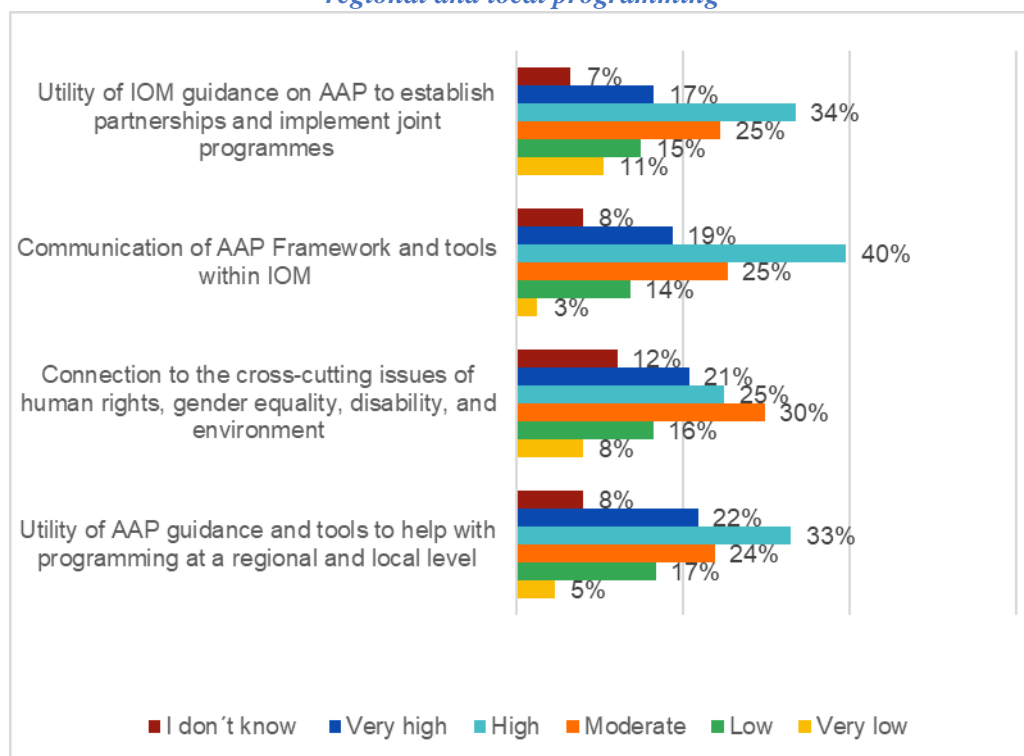
Finding 1.2. AAP is deemed as having general relevance for IOM, although IN/285 is specific to emergency response contexts.⁹ The AAP team has effectively promoted the framework, but there is an unmet demand for translating theoretical guidelines into more practical tools and solutions. Exchange of practical experiences between various field offices.

The AAP Framework has a degree of specificity to humanitarian and emergency response operations. This was found to generate confusion about the operational scope of AAP, although AAP principles and approaches were felt to be relevant also for non-emergency contexts. Some informants suggested that the focus of the current AAP Framework could be revised to strengthen connections with the Sustainable Development Goals.

A distinction should be drawn between the AAP Framework (IN/285) and other guidance and tools available for its “operationalization” (such as the IOM AAP toolkits on [participation](#), (2020a), on [information sharing and transparency](#) (2020b), and on [CFM](#) (2020d)). Perceptions of the Framework often differed from perceptions of the guidance and tools. Most staff interviewed during KIIs found that the Framework was helpful for defining the role of AAP and its importance for the Organization. In contrast, only half of the respondents to the global survey (Figure 3) rated the usefulness of AAP guidance and tools as very high (17%) or high (29%). Informants often felt that, while IN/285 effectively frames AAP, the tools provided and guidance available for the actual implementation of AAP approaches were not as practical as they should be.

⁹ It should be noted that, since 2024, AAP has gained formal relevance across all IOM programming as its oversight was shifted from the Department of Emergencies to the Protection Division. These developments took place during the evaluation period and could not be fully reflected in the findings, but they are relevant to their interpretation.

Figure 3. Effectiveness of guidance and tools on accountability to affected populations for regional and local programming



Source: Evaluation survey.

At the time of this report, IOM had not yet established a dedicated results matrix or theory of change to serve as an all-encompassing system to set targets and track progress in implementing the AAP Framework within the Organization. However, AAP is included in the Organization's Strategic Plan 2024–2028, in the objectives and cross-cutting priorities of the accompanying SRF:¹⁰

- Two AAP-related indicators are included in the cross-cutting priority “integrity, transparency and accountability”:
 - C1.8: “Number of IOM missions engaged in crisis-related programming integrating AAP into country strategic plans”;
 - C1.9: “Number of IOM missions engaged in country's inter-agency AAP working group”.
- One AAP-related indicator is included in the cross-cutting priority “protection-centred approaches”:
 - C3.4: “Percentage of projects integrating AAP operational pillars into their activities”.

AAP is included as well within two of the three strategic objectives of IOM:

- Objective 1. “Saving lives and protecting people on the move”:

¹⁰ IOM (n.d.a). Note that detailed lists of the objectives and of the cross-cutting priorities can be accessed from this page via the “Export” option.

- 1a1 (“# and % of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner”);
- 1b1a (“# and % of new or revised migration-related policies or programming based on consultations with crisis-affected populations”);
- 1b12a (“# and % of crisis-affected persons, including members of community-based committees, who participated in decision-making for the design, planning and implementation of humanitarian programming”);
- 1b12b (“# of humanitarian programmes revised or designed to reflect consultations with the participation of crisis-affected populations”);
- 1b23a (“# and % of complaints processed in a timely, efficient and safe manner”);
- 1b23b (“% of projects that implement a complaint and feedback mechanism”);
- 1b33a (“# and % of beneficiaries who report sustained and meaningful participation in humanitarian protection interventions”);
- 1c23a (“# of humanitarian actors that have been supported to ensure that affected people and local actors are actively consulted in designing and implementing humanitarian response”);
- 1c23b (“# and % of beneficiaries who report being consulted in the design and implementation humanitarian response”).
- Objective 3. “Facilitating pathways for regular migration”:
 - 3d44a (“# and % of beneficiaries reporting that assistance is delivered in a safe, accessible, accountable and participatory manner”).

The contrast between theoretical or legal frameworks and the availability of practical resources and support for their operationalization was a recurring theme in the narrative of many informants, especially in country offices. There was a desire expressed for SOPs, standard software applications for CFM management, solutions for the consolidation of AAP data from different sources, guidelines for AAP budget allocations, and guidance on how to engage with different stakeholders.

“While I’ve seen the Framework being useful within my field of expertise, more practical and standard tools are needed for day-to-day application. Additionally, developing standard indicators to monitor progress at both project and institutional level is essential.”

IOM staff.

Training provided by IOM Headquarters on IN/285 was appreciated, but there were also frequent calls for more detailed and technical follow-ups on the practical (“how to”) aspects of AAP. As stated by one survey respondent, “Guidance and tools should be much shorter and accessible to facilitate use for people who work extended hours and live under difficult conditions.” Several informants stressed the importance of including concrete examples to illustrate practical AAP applications and benefits. These needs were already known by members of the AAP unit in IOM Headquarters, and the creation of a more practical toolkit to fill some of the gaps was underway.

The AAP unit in IOM Headquarters effectively disseminated the AAP Framework and established a point of reference within the Organization, despite its relatively small size. Regular dissemination activities include the publication of newsletters, training offerings, and

the selection of pilot countries for exchanges of practices. However, this evaluation found that good practices in the field of AAP were not being identified and disseminated systematically. AAP activities and solutions remain, to a large extent, implemented in isolation, leading to missed opportunities to upscale or synergize with the initiatives of other projects, units or offices.

Finding 1.3. The role of AAP in promoting cross-cutting themes is considered in the AAP Framework, with practical applications on the ground. The relevance of AAP for environmental sustainability is, however, not considered.

The IOM AAP Framework integrates diversity inclusion principles, focusing on vulnerable and marginalized groups, encompassing human rights, gender equality, and disability. IOM staff informants understood and highlighted the importance of AAP for promoting diversity inclusion. The framework specifies groups such as women, children, LGBTQIA+ individuals, the elderly, people with disabilities and ethnic and religious minorities, among others. During field visits in Türkiye and Ethiopia, particular attention was found to be given to women and individuals with disabilities in different AAP initiatives. More generally, the data gathered suggest that IOM employs multiple mechanisms to engage vulnerable populations, offering guidance on reaching out to the most excluded and amplifying the voices of women, youth and other traditionally marginalized groups.

Numerous instances were identified where women's specific needs were addressed and individuals with disabilities were included in focus group discussions and other consultation methods. However, environment-related inputs are not included in IN/285; further, AAP activities carried out in country offices that were observed or reviewed did not seem to consider the role of AAP in promoting environmental sustainability.

Finding 1.4. The "operational" nature of IOM, and its direct interaction with affected people, give it a comparative advantage in the implementation of AAP initiatives. However, the contribution of IOM to AAP has limited visibility.

Considering that AAP is a responsibility of the humanitarian and development sector as a whole rather than of single or specific organizations, some evaluation questions asked respondents to explore how IOM contributes to the advancement of AAP from a sectorial and collective perspective. Having a "local focus" and being a "frontline" actor were the most frequently indicated comparative advantages of IOM.

Several informants highlighted the potential of IOM to drive significant advancements in the AAP collective space and to foster "collective accountability".¹¹ The Ethiopia case study (Case study 1) illustrates the work done by IOM in this country to provide a platform for the analysis and dissemination of AAP data shared by different actors. However, some informants

¹¹ As noted in the IOM APP Framework (IOM, 2020c:2), "There is no commonly agreed-upon definition of collective accountability." However, as that document explains, the term is often used in the context of AAP discussions to indicate that "multiple humanitarian actors are engaged in joint programming, provide common services and pursue collective outcomes", and that therefore "[a]ll actors involved in such joint efforts are required to ensure AAP obligations and commitments are upheld". For more, see Finding 2.2 below. In the context of this evaluation, "collective accountability" broadly refers to how AAP should be undertaken jointly by different organizations present in a given operational context, to the extent they are all collectively accountable for their interventions (and the coordination between those interventions) among affected people.

questioned whether IOM was living up to its potential, arguing that more could be done to ensure AAP initiatives are coordinated with partners and made visible. These perceptions find confirmation from the desk review conducted for this evaluation, which identified only a relatively limited amount of public documentation and externally facing dissemination material on AAP initiatives led by IOM.

Coherence

Evaluation questions and themes for the “coherence” criterion:

- EQ7. Which mechanisms are in place to guarantee internal coherence for the inclusion of AAP principles and commitment in relevant IOM areas of work?
- EQ8. Does IOM effectively align its AAP interventions with United Nations and IASC AAP related guidance and mechanisms at global, regional, and national levels?
- EQ9. Are IOM AAP principles, mechanism and framework encouraging and reinforcing international and local partnerships for a comprehensive response tailored to the needs of affected populations?
- EQ11. Have IOM AAP Framework initiatives been effective to foster coordination with local and international partners for a better response, tailored to the identified needs of the affected populations?

Finding 2.1. IOM pursues AAP through various frameworks and initiatives that are not always coordinated.

At a general level, IOM is widely receptive to the integration of AAP principles and initiatives into its interventions. AAP-related initiatives were being pursued even before AAP was formalized in IN/285, though according to one informant, AAP was probably seen as “good programming” rather than a mandatory requirement.

According to most informants, the idea of actively listening to and engaging with affected people is on the way to becoming fully accepted by IOM staff. This sentiment is exemplified by one chief of mission who stated that “regular consultations are embedded in everything we do.” This finding is supported by interviews with IOM regional and country offices, where the staff consulted reported frequent engagement with affected people before interventions, during programme implementation, in post-assessment surveys, and in community programmes to run local initiatives.

According to many informants – and as also confirmed by the Turkish and Ethiopian case studies – collaboration on the implementation of AAP initiatives, as well as the search for synergies between different projects, units, or departments implementing AAP, appears to be challenging in IOM. Informants interviewed from various regions, particularly those in field offices, highlighted communication challenges within IOM departments and across different thematic initiatives. Despite increasing efforts to enhance connections between AAP and PSEAH, to enhance connections between AAP and the rights-based approach, and to enhance the gathering of AAP data by the DTM unit, difficulties persist. As one informant stated, “IOM thoroughly engages with affected populations, but there is not unity between what is done by

Protection, PSEAH, and AAP when interacting with vulnerable groups.” Ultimately, many informants attributed these challenges to the “projectized” nature of IOM, where individual initiatives proceed in a more or less autonomous manner.

Informants located in field offices also noted that different policies and thematic initiatives in IOM are, de facto, in competition with each other, as the resources and staff time available for their implementation may often be severely constrained. More or less deliberate trade-offs have to be made concerning different policies, noting also how support coming from IOM Headquarters is generally specific to a single initiative or theme, ignoring the interrelationships with other frameworks.

“Technical solutions or guidance on cooperation and partnership for small missions could be reinforced.”

IOM staff.

A lack of coherence between AAP and the Data Protection Policy was mentioned by informants: obstacles to sharing AAP data (because such data include personal information) were noted in some cases, and a lack of support for the definition of data sharing agreements was noted in others. While the merit of these perceptions could not be verified as a technical analysis of the coherence between the AAP Framework and the Data Protection Policy goes beyond the scope of this evaluation, this instance is presented as an example of frameworks that may not have been fully coordinated in their development and in their implementation, for the further consideration of technical experts in IOM.

Finding 2.2. There are instances where IOM promoted or supported collective accountability through its AAP initiatives, but there are also instances where coordination or collaboration with other actors was lacking. “Collective accountability” emerged as a central theme in the narrations of the informants and is an area where there may be an unmet demand for additional guidance, support and monitoring.

In Ethiopia, a joint platform exists where United Nations agencies and various organizations involved in the AAP working group can input data for shared use amidst the ongoing crisis. In this context, the IOM Ethiopia Chief of Mission provided direct reports to the United Nations Country Team on the feedback from affected people (see Case study 1). An additional significant case shared was the Response for Venezuela coordination platform, created by the Office of the Special Envoy for the Venezuela Response, with IOM acting as inter-agency AAP coordinator since 2021. According to IOM informants, the platform was crucial in orchestrating efforts across South America to assist Venezuelan migrants. In both examples, unified platforms were created for agencies to use AAP data collectively and conduct shared initiatives (such as AAP-related training courses), with perceived benefits to coherence and efficiency.

At the same time, informants also indicated the presence of significant obstacles and missed opportunities related to collaboration with other United Nations agencies and other organizations in terms of AAP. Almost all informants based in field locations that were consulted for this evaluation mentioned how, very often, feedback collected through CFMs cannot be fully acted upon by IOM alone, lamenting also the lack of a collective accountability approach by which different humanitarian and development actors could provide a coordinated and consolidated response to the issues raised. Informants noted that the fragmentation of AAP systems (across separate organizations) sometimes means that multiple

(potentially unnecessary) consultations are conducted with affected people, causing fatigue and frustration, especially when complaints are only partially addressed (if at all).¹²

Several informants indicated collective accountability as a focus area for investments aiming to refine AAP implementation. As part of the desk review conducted for this evaluation, no internal guidance nor technical resources regarding collective accountability (such as legal templates for collaboration or data sharing) were found. Moreover, it is worth noting how none of the SRF quantitative indicators that are currently in use to monitor AAP assess collective accountability.

Effectiveness

Evaluation questions and themes for the “effectiveness” criterion:

- EQ12. Are IOM’s approaches and interventions adapting and responding effectively and timely to different aspects and rising needs of AAP?
- EQ13. Has IOM’s decision making been effective in leading, coordinating and delivering institutional AAP approach, to make the best use of IOM’s strengths and areas of expertise?
- EQ14. To what extent have IOM’s AAP instruments, feedback mechanisms and broader community-based initiatives been effective to support the implementation of AAP principles and commitments for the most vulnerable and to ensure that no one is left behind?
- EQ15. Have IOM’s communication tools been effective to raise internal and external awareness on AAP and to properly integrate the views of affected populations?
- EQ16. Are there systems in place to document and measure IOM’s global and programmatic performance of the inclusion of AAP principles and commitments in its activities and to record lessons learned and factors affecting IOM’s performance?

Finding 3.1. There are clear indications that the overall volume of AAP activity is increasing in IOM, notably in terms of establishing CFMs and providing information to affected people. Yet the overall progress appears to be limited when considering the size of the Organization.

All performance indicators used by IOM to assess progress in AAP have improved (Table 3). The number of offices integrating AAP into the design, planning and implementation of responses, as well as the presence of focal points in inter-agency coordination, achieved values in 2023 that doubled the baseline of 2019. The integration of AAP in country-level crisis response plans also increased substantially. Interview and survey data gathered for this evaluation also indicate that IOM is making greater efforts to inform affected people and establish CFMs (both are pillars of the AAP Framework).¹³

¹² As well, some informants associated conducting multiple consultations with the formation of unrealistic expectations among affected people.

¹³ As will be further elaborated in the subsection to follow on efficiency, qualitative findings also highlighted numerous operational challenges and difficulties in using the feedback gathered through CFMs.

In the absence of clear targets, the growth in volume of AAP activities can only be put in relation to the size of IOM as an Organization. As per the IOM website, the Organization operates in 171 countries globally and has 590 offices (IOM, n.d.b). From this viewpoint, results appear to be still a long way from achieving complete (or even extensive) coverage. Although the data from the indicators and the number of IOM offices indicated on the corporate website may not be directly comparable, doubts about whether the current progress should be considered satisfactory are legitimate.

Table 3. Accountability to affected populations performance indicators used by IOM and available between 2019 and 2023

Indicators available in the annual reports*	2019	2020	2022	2023
Number of country-level crisis response plans that integrated AAP	39	47	N/A*	47
Number of offices engaged in crisis-related responses with focal points participating in inter-agency coordination on AAP	23	35	39	56
Number of offices engaging with affected people in the design, planning, and implementation of responses	61	N/A*	71	120

* N/A: No data available for the relevant indicator in the annual report for the given year.

Source: Data collected by AAP unit.

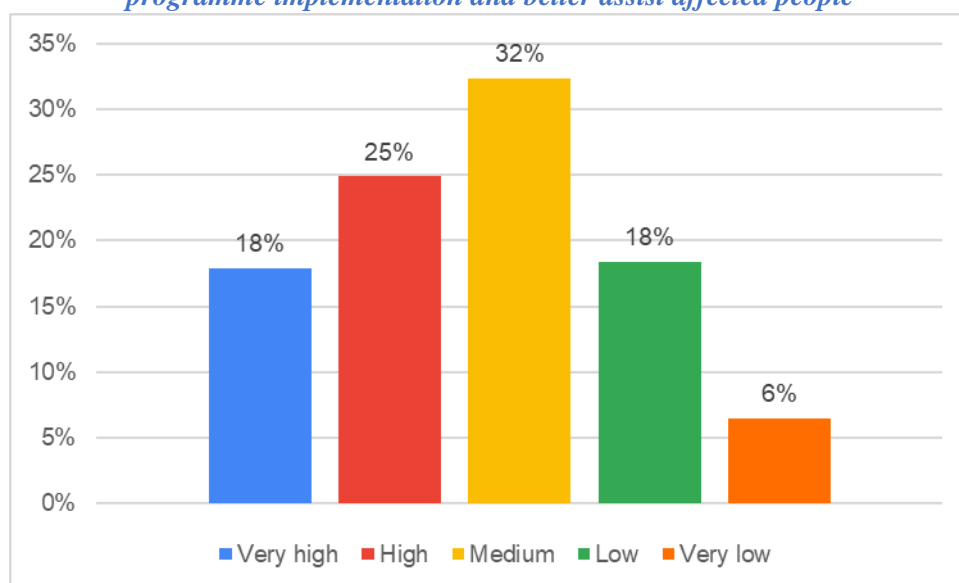
Finding 3.2. Data gathered from affected people were seen to inform operational adjustments in several instances, but there is also a feeling that not all CFM data are used.

This evaluation revealed numerous instances where complaints and feedback led to programme adjustments. Programme changes cited included enhancing training sessions, offering more suitable shelters, revising procurement procedures to engage cost-effective services, integrating psychosocial support, installing additional lighting, designating a food distribution day for individuals with disabilities, identifying safer and more accessible locations for WASH facilities for women, improving ground insulation, transitioning from in-kind aid to cash-based interventions, promoting additional communal spaces, adjusting communication practices and cash delivery methods for households with special needs, addressing vulnerabilities, and enhancing the quality of food provided as well as refining beneficiary targeting and selection.

In the evaluation survey, respondents were asked to rate IOM competence in using feedback from affected people to modify programme implementation and enhance assistance: 43 per cent indicated a very high or high competence, 32 per cent gave a moderate rating, and 25 per cent rated it as low or very low. This varied perspective is supported by qualitative data: several of the IOM officers interviewed noted that considerable data are collected from affected people, but further efforts are needed to properly analyse and utilize it for informing implementation and future programme design. Others noted the lack of formal mechanisms

for follow-up adjustments, noting how these may not necessarily apply to an ongoing initiative but to future ones, and should therefore be considered at the project development phase.

Figure 4. Assessment of IOM ability to use feedback from affected people to change programme implementation and better assist affected people



Source: Evaluation survey.

Finding 3.3. There is a perceived gap between the rationale for undertaking AAP and its practical implications for programming that, if filled, can increase effectiveness.

IOM advocates internally for AAP through a human rights-based approach, consistent with its global principles and values. Nevertheless, most informants interviewed noted that the AAP Framework places limited emphasis on how programme implementation can practically benefit from the feedback received from affected people. As one of them stated, “People have not realized the risk of not involving communities. It is crucial to show results [from involving affected people], not just principles. Explain to staff why they should do it.”

Several respondents suggested including more AAP-related material in the next revision of the *IOM Project Handbook*, to bridge the gap between policy and practice more effectively. It was suggested that such integration should explicitly integrate AAP activities into the project cycle. Moreover, some suggested making the link between AAP and risk management stronger: affected people are often better positioned than IOM to make practical decisions about programme activities (for example, selecting playground locations, determining suitable livelihood options in the local context and addressing educational access challenges) and even when not, their input on these decisions is anyway essential to avoid gross operational mistakes. In this sense, it was suggested that the involvement of affected people can be framed also as a vital tool for mitigating risks inherent in humanitarian and development interventions.

Finding 3.4. The institutional framework for monitoring the implementation of AAP policy is basic and predominantly focuses on outputs rather than outcomes and impacts. The IOM SRF (2024) is commendable in that it shifts its focus towards outcomes, including service and programme satisfaction revised according to feedback from affected people, but there is still a need for a specific and comprehensive monitoring framework for AAP.

The monitoring of AAP in IOM is based on indicators included in other institutional monitoring tools rather than having its own dedicated logical framework based on a clear theory of change. The indicators used show that the focus of monitoring activities is predominantly on outputs, with targets not clearly defined and with an unclear distinction between outputs, outcomes and impacts, or objectives.

In the IOM Strategic Plan 2024–2028 and the IOM SRF, new AAP indicators have been included (see Annex C) that can enhance reflection on the tangible benefits of AAP. Concerning the identification of good practices, some informants in field offices expressed uncertainty on how “success stories” were identified by IOM Headquarters.

Finding 3.5. Engagement with and awareness of AAP among senior or leadership officers is unequal, with officers in field offices being more committed to AAP than those in central functions.

Several IOM officers consulted believed that senior leadership was somewhat disengaged from AAP or only marginally attentive to it. This sentiment is also reflected by the resources allocated to AAP activities at the central level, which several informants considered to be inadequate.¹⁴ The limited investment of core funding in AAP – with, at the time of this evaluation, the AAP Coordination Unit primarily being staffed by consultants funded by a specific USAID Bureau for Humanitarian Assistance initiative – is perceived as a sign that implementing AAP is not a top priority for IOM.

Senior staff consulted in field offices generally appeared to be engaged with and aware of AAP. In the IOM Ethiopia Country Office, for instance, AAP was addressed at the highest organizational level, enabling the appointment of AAP focal points for all suboffices, setting up mechanisms to share data with external partners, and holding discussions with the United Nations Country Team (see Case study 1). Conversely, the engagement of leadership at the headquarters level seemed to be confined to the initial stages, during the design and launch of the AAP Framework. This evaluation attempted to consult senior IOM Headquarters officers on this matter, but interviews did not take place due to the unavailability of the individuals contacted.¹⁵

¹⁴ This finding, gathered in 2024, backs up the 2023 MOPAN analysis regarding AAP, which concluded that IOM had not yet been able to consistently incorporate AAP across all its programmes and did not invest adequately in AAP, considering the scale of its operations.

¹⁵ The unavailability of senior IOM Headquarters staff to be interviewed for this evaluation was interpreted as a sign of limited engagement on the matter.

Efficiency

Evaluation questions and themes for the “efficiency” criterion:

- EQ10. What systems are in place to collect and integrate the views of affected populations in IOM’s work?
- EQ17. Are IOM’s resource allocations appropriate to support IOM institutionalization and operationalization of AAP approach and related evolving international requirements? Are the specific resources allocated to AAP managed efficiently?
- EQ18. Are the systems in place to support IOM offices in fundraising for AAP interventions efficient, adaptive, and cost-effective?
- EQ20. Is IOM efficient in supporting and enhancing staff expertise and development in the field of AAP?

Finding 4.1. The amount of resourcing allocated to AAP is inadequate to pursue institutional objectives, and the funding of AAP is not approached in strategic terms. The size of the AAP unit in IOM Headquarters increased but remained modest for the workload.¹⁶

IOM was found to have implemented a large number of systems for collecting data from affected people. The decentralized structure of IOM was widely recognized by informants as conducive to tailoring AAP approaches to different operational and cultural contexts. Discussions of the diversity of tools used to engage affected people (including SMS, WhatsApp, social media, house visits, complaints boxes, hotlines, calls, surveys, focus group discussions and community engagement projects) emphasized the adaptability of IOM, particularly in challenging environments.

At the same time, informants interviewed for this evaluation overwhelmingly felt that the resources currently allocated to AAP in IOM Headquarters are insufficient to meet the demand for support and learning coming from country offices, as well as to drive the development or expansion of relevant guidance and resources. Some informants were frustrated by the absence of an overall funding strategy for AAP to support central AAP structures, noting how advancements often overly relied on the dedication of staffers instead of a structured and sustainable approach. At the country level, informants noted the way that funding for AAP functions often depends entirely on a single project-specific budget, with limited to no use of the (scarce) core resources available to country or regional offices, and rare cases of pooling resources proportionally from different projects (see Case study IOM Ethiopia for an example).

The size of the AAP unit in IOM Headquarters has expanded over time, though it clearly remains disproportionately small when considering the size of the Organization, as well as the fact that AAP is a mandatory aspect of the work of IOM since the formalization of the AAP Framework into IN/285. At the time of writing these findings, only one full-time staffer was

¹⁶ This finding should be read in conjunction with Finding 3.5.

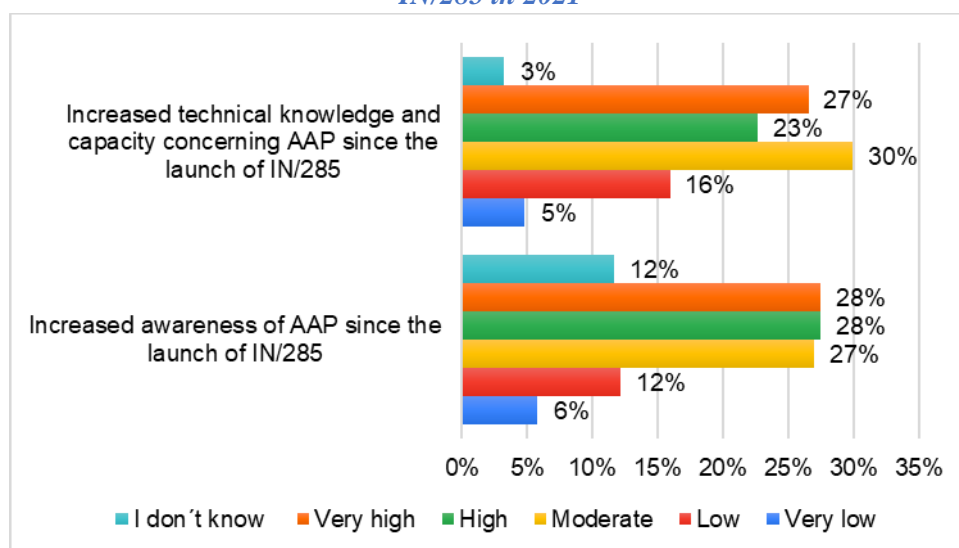
dedicated to AAP in IOM Headquarters, with the rest of the team consisting of five consultants (funded by the USAID Bureau for Humanitarian Assistance based on a project agreement).

Finding 4.2. Training and learning resources made available by the AAP unit in IOM Headquarters function to increase awareness of AAP and capacity, but there is still unmet demand for learning, especially when it comes to resources and support for bridging theory and practice.

Data collected for this evaluation clearly show that awareness and understanding of AAP concepts within IOM have increased since 2021. According to the evaluation survey, 56 per cent of respondents confirmed their awareness of AAP had grown since 2021, while 80 per cent reports very high to moderate improvement in their knowledge and technical capacity regarding APP over the same period (Figure 5).

Informants generally recognized that this progress was, at least in part, due to the training initiatives led by the AAP unit in IOM Headquarters. Informants involved in the facilitation or design of these trainings perceived them as “popular” among IOM staff based on how the response of trainees and their participation was perceived (however, neither exact figures on attendance, nor pre-training and post-training assessments were reviewed as part of this evaluation). At the same time, several informants, especially those operating in country offices, mentioned that capacity gaps persisted and lamented an often “superficial” understanding of AAP principles and concepts among the “average” IOM staffer, due to lack of practical knowledge on how to implement AAP in actual operational settings and in a non-improvisational manner. Informants interviewed for both the IOM Türkiye and the IOM Ethiopia case studies provided similar remarks on a gap between *understanding* AAP and *ability* to implement it.

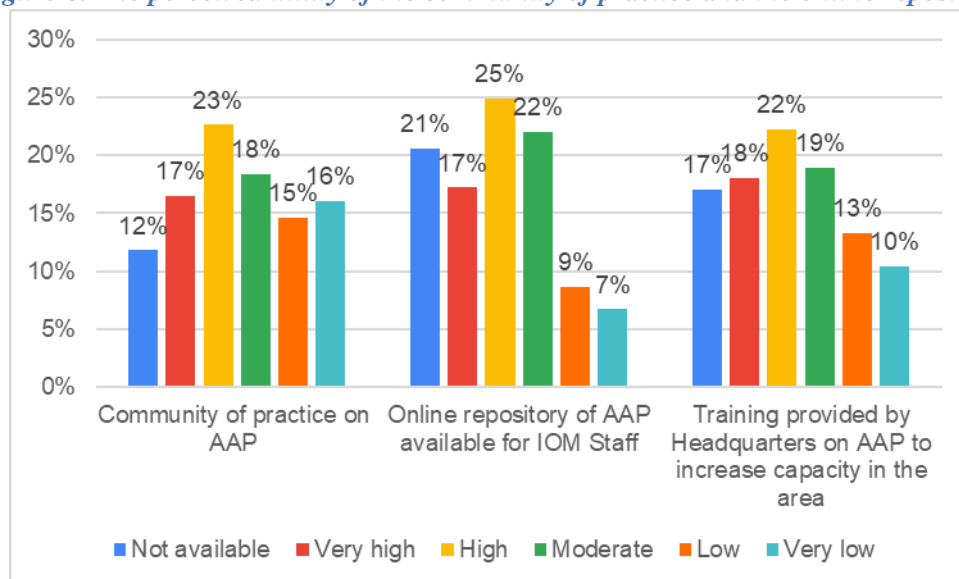
Figure 5. Perceived growth of capacity and awareness of IOM staff since the launch of IN/285 in 2021



Source: Evaluation survey.

Many informants credited the dedication and proactivity of the small AAP team in IOM Headquarters in establishing learning mechanisms such as the AAP community of practice and the online repository, as well as in conducting global trainings. However, some informants felt that the demand for learning was still, to a significant extent, unmet. Most IOM staff interviewed valued the in-person AAP training sessions, feeling that these sessions helped them recognize the importance of integrating AAP into their programmes and daily practices. However, they also frequently expressed a need for more practical training and follow-up, sometimes indicating that conducting AAP training-of-trainers would be a possible solution.

Figure 6. The perceived utility of the community of practice and the online repository



Source: Evaluation survey.

Concerning perceptions of the AAP community of practice and the online repository, survey data regarding the utility of these tools appear mixed, especially with regard to the community of practice (Figure 6), with some informants suggesting that more promotion and incentives for engagement would be needed to make the community more active and relevant.

Finding 4.3. Guidance and resources are missing for efficient CFM development and management, leading to duplication of effort, reduced relevance and reduced impact of the analyses produced.

The lack of guidance and resources for CFM implementation and management (which could potentially range from simple form “templates” to dedicated software applications with multiple functions) was frequently mentioned by informants, especially those based in country offices. In particular, this gap was perceived as severely affecting efficiency, such as through loss of information or duplication of effort. The picture emerging from the different inputs on CFMs is one of fragmentation, where different systems and tools have been developed in

relative isolation, most often at the level of single projects, with rare instances where efforts were coordinated to devise solutions applicable to entire country offices.¹⁷

The predominant perception is that CFM development and management is an area of AAP that is particularly unstructured and lacking guidance, and one where significant duplication of effort may be taking place. Different examples of CFM systems of varying complexity and functions were gathered, always in the context of autonomous development. These narrations sometimes pointed at the significant upfront costs of setting up these systems, at how IOM may be incurring these costs multiple times across the different autonomous initiatives, and how these costs remain to date an insurmountable barrier for some smaller projects or country offices to set up “modern” solutions.

“IOM needs a systematic approach and structure for CFMs at field offices. Now there are separate, messy systems different across every [country office] and confusion on whether MEAL, Communications, or other function should manage them; confusion on how to use the feedback into and out of the country office and no systematic system to track follow-ups.”

IOM staff.

While flexibility and autonomy may promote innovation and better adaptation to different contexts, no informant elaborated on or suggested that a structured initiative is in place to map CFM solutions in the Organization, to identify scalable ones, or to identify and disseminate good practice in general. The development of a “standard CFM system” was sometimes mentioned as needed,

although with some caveats and scepticism on the possibility of this solution being available in the short or medium term, with the suggestion that the Organization could look also at what other organizations have developed.

Another common theme in the responses concerning CFMs was the limited capacity to consolidate CFM data and produce analyses with uses that go beyond the reporting requirements of the specific project that funded the CFM. Most informants felt that data gathered through CFMs were not being fully utilized due to limited incentives or resources to go beyond the reporting requirements, which are very often based on simplistic indicators that merely count the number of complaints received and responded to, without looking at how those complaints are addressed.¹⁸

¹⁷ Case studies 1 and 2 provide some details on the CFM systems in use in IOM Türkiye and IOM Ethiopia, and how their use may be limited to specific units or projects within the respective country offices. IOM Sudan was indicated by one informant as having developed a comprehensive CFM system, inclusive also of follow-up monitoring functionalities, although this solution could not be reviewed as part of this evaluation.

¹⁸ The points raised in this paragraph should be read in conjunction with Finding 2.2 on collective accountability.

Impact

Evaluation questions and themes for the “impact” criterion:¹⁹

- EQ21. How is IOM’s impact in the field of AAP perceived by IOM Member States, donors, United Nations partners and affected populations, including beneficiaries?
- EQ22. Did IOM’s investments in AAP institutionalization and programmes lead to immediate and medium-term results and impacts that can be identified at global, regional, and national levels?
- EQ23. Did IOM’s programmes and projects have an impact on the representation and meaningful participation of particularly vulnerable population groups (i.e., women, girls, persons with disabilities) in decision making processes?

Finding 5.1. While assessing impact is impossible at this stage, there are positive signs of increased involvement and engagement that might be attributable to AAP initiatives.

During the course of this evaluation, several examples were gathered of AAP being effectively implemented in different operational contexts. IOM piloted the AAP Framework in Türkiye (see Case study 2), South Sudan and Nigeria. Noteworthy AAP practices have also been reported in Bangladesh (IOM, 2021c), Ethiopia (see Case study 1), Ukraine, the Response for Venezuela, Pakistan, Iraq and Somalia. In Ukraine, IOM developed several online consultation mechanisms to better reach mobile populations. In the Republic of Moldova, IOM has established a Telegram channel and has appointed a dedicated AAP officer to manage community engagements, trainings and hotlines, and to ensure the efficacy of the overall approach.²⁰ In Ethiopia, a comprehensive AAP approach was developed, covering different functional and programmatic areas of the office. A common thread of the examples gathered was a strong leadership engagement, innovation and, in some cases, an expanded conception of AAP that included, for instance, actions to help increase the self-esteem of affected individuals (IOM, 2021c).

Examples were also gathered of how engaging with affected people led to changes. In Ethiopia, it emerged that only men had access to short-term, unskilled or semi-skilled jobs (such as shelter maintenance, drainage system and water tanker installation) with partners in the camps: women within the committees advocated for equal job opportunities and this led to an increase in their participation in such roles. Also in Ethiopia, the design of shelters was modified based on women’s needs and preferences. Discussions highlighted the significance of common shelters, preferred by women as offering a better sense of safety. Concerns regarding sanitation were also resolved through open dialogues in various sessions. Some

¹⁹ The authors acknowledge that impact assessment methodologies (featuring the use of a counterfactual and statistical techniques to robustly establish attribution) were outside of the scope of this evaluation. What is presented in this section should be taken as simply illustrative and preparatory to the definition of future impact assessments focusing on AAP activities, which the authors highly encourage IOM to undertake.

²⁰ [IOM Moldova Telegram channel](#). According to the [IOM situation report from Moldova for October–December 2023](#), “IOM continues to mainstream AAP through online information sessions, a toll-free call centre and community information centres, offering comprehensive information on IOM project activities, available support and acting as a platform for receiving complaints, feedback, and referrals. In November [2023], an information session hosted on IOM Moldova’s Telegram channel, with over 1,000 members, addressed 39 questions about IOM’s assistance. The toll-free call centre at 080010877 continues to serve as the primary channel for referrals, feedback, and complaints. Throughout the reporting period, a total of 1,433 calls were received, with most inquiries focusing on rental assistance, cash assistance, and legal support” (IOM, 2023e:6).

informants suggested that, with regard to IOM distribution activities, consultations on distribution reach, quality and procedures with the affected people improved the integrity of the distribution process. These informants indicated that such AAP initiatives were taking place in IOM Türkiye.

The notion that AAP can lead to improvements in programme design and implementation, as well as to improved outcomes, was understood by most individuals consulted. Numerous examples were provided of past or ongoing initiatives to involve affected people in the project cycle, with a strong emphasis on the inclusion of women and people with disabilities. However, it was not always clear whether these initiatives necessarily translated into significant changes; nor was it clear that it fostered a sense of agency and empowerment among the individuals and communities involved.²¹

At the field level, the evaluators came across initiatives supporting self-governance structures and participation in camp activities. Beneficiaries were encouraged to take on tasks related to on-site management and daily routines, and to running relatively small-scale projects. These initiatives were deemed as promising and relevant for enhancing the impact of AAP.

Sustainability

Evaluation questions and themes for the “sustainability” criterion:

- EQ19. Does IOM’s participation in the United Nations and IASC mechanisms facilitate access to funding and resource mobilization related to AAP?
- EQ24. What systems are in place to address and guarantee the sustainability of IOM’s application of AAP principles and commitments in its interventions?
- EQ25. Does IOM’s engagement with governments, civil society, the United Nations, IASC and affected populations facilitate the sustainability of IOM’s support and accountability?
- EQ26. Has IOM’s integration of AAP principles in its work helped to generate stable and long-lasting participation and accountability mechanisms for people from affected marginalized groups?

Finding 6.1. IN/285 constitutes a milestone achievement for sustainability, as it provides a legal basis for the IOM commitment to AAP. However, uneven leadership engagement and inadequate resourcing risk making this commitment aspirational rather than real.

As part of the Grand Bargain and other international commitments, IOM operates within a broader network of United Nations organizations and donors advocating for investment in AAP. Informants saw that active engagement in this environment was key to receiving dedicated funding for the development of the IOM AAP Framework.²² The release of IN/285

²¹ Some results from the global survey also suggested less than clear outcomes in this area. When staff were asked if IOM activities had successfully enhanced the participation of vulnerable populations in decision-making processes and whether they had resulted in improved well-being and empowerment, results were mixed. See Annex E for the full details on the survey results.

²² IOM has received substantial and dedicated donor support for the development of its AAP Framework, particularly from the United Kingdom Foreign, Commonwealth and Development Office and the USAID Bureau for Humanitarian Assistance. Informants also acknowledged the benefits gained from engagement with the Inter-Agency Standing Committee (IASC) while developing the institutional AAP Framework.

(alongside all the related initiatives led by a small but dedicated AAP unit in IOM Headquarters) marked a fundamental institutional milestone for the sustainability of AAP in IOM, as it established AAP integration as mandatory within the Organization, and gave a legal foundation for the IOM commitment to AAP.

At the same time, this evaluation found that the level of understanding of and support for AAP among senior and leadership officers was unequal (Finding 3.5) and generally insufficient at the central level.²³ It found that resources for central AAP functions are inadequate, that the AAP unit is undersized vis-à-vis the tasks at hand, and that funding for AAP at the country level largely depends on single projects (Finding 4.1). This has resulted in a fragmented approach and in the whole AAP agenda being driven by initiatives often undertaken in relative isolation, sometimes unable to respond to broader AAP needs that go beyond those of the single funding project. Inefficiencies – with cost implications, as in the case of CFM development and management (Finding 4.3) – are also relevant to the longer-term sustainability of AAP, given the context of inadequate resources.

²³ The fact that the development of the AAP Framework was funded through project resources, and that central AAP functions depended, at the time of this evaluation, largely on project funding rather than core resources, may support this view.

3. CONCLUSIONS

The 2023 MOPAN assessment of IOM concluded that, with regard to AAP, IOM has not yet been able to consistently incorporate AAP across all its programmes, and did not invest adequately in AAP, considering the scale of its operations.²⁴ Overall, this evaluation confirms these MOPAN conclusions. As well, it identifies areas where considerable progress has been made or is being made, mainly thanks to the dedication of an undersized central AAP unit, and that of several staffers in country offices who most often undertake AAP initiatives with project-specific funding.

The IOM AAP Framework is relevant to the mission of the Organization and consistent with the United Nations system and with IASC policies. The desk review and consultations held confirmed that the IOM AAP approach considers the cross-cutting issues of human rights, gender equality and disability, though it does not address environmental issues well (or at all). IN/285 was developed in consultation with various stakeholders and through a thorough review of previous organizational frameworks to ensure internal consistency. As a result, IN/285 is formally consistent with other relevant IOM policies and guidelines. However, at the operational level, where field staff have to consider multiple policies and organizational priorities, the interlinkages between AAP and other frameworks (such as data protection, for example) are not always explicitly addressed, due to a perceived lack of available guidance, tools and support that address such links. To extend the example of data protection, the practical resources (such as a template for data-sharing agreements) and support are lacking that would be required to ensure that AAP activities oriented towards collective accountability (which sometimes entail sharing the personal data of affected persons, for instance) are undertaken in accordance with data protection principles and standards.

The provision of appropriate guidance and tools for practical AAP implementation is an essential aspect that this evaluation considered. Informants overwhelmingly found that IN/285 was valuable in steering IOM efforts in AAP and appreciated the training sessions offered by IOM Headquarters to improve awareness of these requirements (IN/285 established the mandatory nature of AAP in IOM). At the same time, some informants voiced doubts about the practical implications of the mandatory nature of AAP, and about whether IN/285 applied to non-emergency response operations (since IN/285 does indeed focus on emergency response operations). Overall, the data gathered are clear in indicating that there is an unmet demand for learning, for a clearer integration of AAP into the IOM project cycle, for more “standard” tools (especially in the area of CFM) and for closer support in implementing AAP activities, as these take place in diverse and sometimes challenging operational contexts that might require tailor-made solutions. It is also clear from the desk review conducted for this evaluation that AAP activities have very limited internal and external visibility, ultimately both affecting the perception of their relevance and limiting awareness of them.

²⁴ MOPAN (2023): “the assessment found that AAP is still only partially integrated into country strategies, programme designs and partnership agreements, and reporting on AAP activities is not systematic.... Given the complexity of IOM’s operations, there is still some way to go to institutionalise AAP across the organisation” (47).

The notion of “accountability” in AAP should always be seen as collective, in the sense that the whole humanitarian and development system should be accountable to the affected people they are supposed to serve, rather than each single organization holding that accountability individually. All actors operating in a specific context should work in concert to achieve common goals and complement each other, based on their respective roles and capabilities, and that requires collective accountability.²⁵ In this evaluation, collective accountability emerged as a frequent and important concept in the narration of many informants. Instances were described in which IOM established effective communication and coordination with other United Nations agencies and partners (for example, for the joint collection, analysis and dissemination of CFM or needs data) to promote collective accountability. In other cases, scenarios of limited inter-agency communication and collaboration on AAP were described, sometimes producing cumbersome or uncertain referrals, and sometimes making it impossible to properly address reasonable needs voiced by affected people, as these did not fall within the IOM operational sphere.

Many examples of operational changes and adaptations that were based on feedback received from affected people were gathered as part of this evaluation, suggesting that AAP initiatives have some effectiveness in informing operations. At the same time, some findings point at the need to structure or strengthen the processes that translate feedback into meaningful operational adjustments (in a timely manner), and several informants perceived that not all data gathered from affected people were being used.

At an aggregate level, more and more AAP engagement is taking place in IOM, as confirmed by both the prevalent perceptions of informants and by the fact that indicators used to monitor AAP in IOM are generally recording substantial improvements. It is, however, doubtful whether the current level of AAP engagement is commensurate to the size of IOM operations. Moreover, IOM does not have a formal result matrix or a theory of change for AAP; rather, it relies on a collection of indicators from different institutional monitoring frameworks, mostly focusing on outputs and on broadly defined outcomes, which makes it hard to usefully assess the implementation of AAP. Overall progress still seems insufficient to support claims of AAP mainstreaming within the Organization.

The opinion that resources allocated to AAP in IOM are inadequate was prevalent in both qualitative and quantitative data gathered for this evaluation. The work that led to IN/285 was funded by donors on the basis of a specific initiative. The size of the central AAP unit in IOM Headquarters was generally deemed insufficient to proactively engage with technical support, capacity-building activities including training and programme and policy development. In country offices, AAP initiatives are most often funded by and within specific projects, with their scope tailored to the requirements of the funding initiative. Some informants doubted that IOM has a strategic approach to the funding of AAP, neither at the central nor at the country

²⁵ Some informants pointed out the fact that collective accountability applies not only to the organizations intervening in a certain operational context, but also to their donors. According to one informant, donors sometimes push for the integration of AAP into the initiatives they fund, but then are not necessarily equipped or willing to make adjustments to their funding allocations when these would be required to follow-up on feedback received from affected people. The role of donors was not sufficiently explored in this evaluation to formulate specific findings and recommendations on this issue. It is, however, hoped that this aspect will be explored in future evaluative work.

level, where only one office (Ethiopia; see Case study 1) was known to have devised a system by which AAP activities are undertaken through an office-wide approach (rather than being project specific) and funded proportionally by all relevant projects.

The scarcity of resources allocated to AAP might have created strong incentives for their efficient utilization, especially at the central level. However, some findings point at how the “fragmented” funding approach based on individual projects (and the uncertainties that come with that) may be creating inefficiencies, especially in terms of duplication when developing and managing CFMs (a domain of AAP on which an urgent need for institutional guidance and resources was often voiced). These narratives stress the importance of greater communication and collaboration on AAP between different projects, technical areas and implementing units, establishing wherever there are possible office-wide approaches to AAP.

Assessing the impact of AAP initiatives goes beyond the scope of this evaluation and its methodological design. It is, however, hoped that these findings might help identify cases that can be the subject of robust impact assessments in the future.

The release of IN/285 was a milestone achievement for IOM engagement with AAP. By providing a legal foundation for the IOM commitment to AAP, this document is one of the pillars for the sustainability of IOM AAP engagement. Active participation in the IASC on AAP was largely perceived to have brought benefits in terms of resource mobilization and awareness, leading to the conclusion that this engagement should not dwindle. Moreover, there are clear signs that AAP principles and values are penetrating IOM “corporate culture”, with more and more staff understanding the need for and advantages of accountability, including important aspects of it such as meaningful community engagement and robust CFMs. Conversely, uneven support for AAP among the senior management of the Organization (with a gap noted in IOM Headquarters leadership), the inadequate resources allocated to AAP, as well as the absence of a clear strategic approach to AAP funding and implementation (at both central and country office levels), all cast a shadow over the sustainability of AAP, with the risk of increasing perceptions that IOM commitments on this matter remain more aspirational than real.

4. RECOMMENDATIONS

IOM should be mindful of the fact that the following recommendations and their recommended actions may have to be implemented in a specific order to optimize benefits. The way these have been ordered here is not suggesting an “optimal” implementation sequence. Finding the optimal implementation sequence is something that IOM will have to undertake in the context of the development of a comprehensive strategy and related action plan for AAP (Recommendation 2).

Some recommendations embed activities that can be considered by IOM for follow-up. Any management response given to these recommendations should elaborate on the merit of the proposed activities, making sure that a robust justification is provided when any activity is discarded.

Recommendation 1: The AAP team should clarify that the scope and applicability of AAP extends beyond emergency response operations, reinforcing also the message on the mandatory nature of IN/285.

This recommendation responds to findings suggesting that doubts persist regarding the mandatory nature of IN/285 and its applicability beyond emergency response operations, considering that the instruction focuses specifically on this type of intervention. To this end, a revision of the instruction or the release of other types of official statements specifically addressing these doubts should be considered.

Recommendation 2: The AAP team should develop an operational medium- to longer-term strategy for AAP, to be negotiated at the highest leadership level, with a three-year plan connected to a funding strategy.

This recommendation considers findings on the uneven support for AAP among IOM senior management, placing emphasis on the need to have the strategy endorsed at the level of deputy director generals, or even directly by the Director General. The resulting strategy should also be usable as a fundraising tool to attract more resources towards AAP, while also mobilizing core funding to show the Organization’s institutional commitment to AAP.

Recommendation 3: In conjunction with Recommendation 2 above, the AAP team should develop a theory of change and a dedicated monitoring and evaluation framework for AAP.

A more structured strategic approach to AAP will require a dedicated and robust framework for its effective monitoring. A new dedicated framework can build from the current existing framework but will need to feature additional indicators (formulated also on the basis of the findings of this evaluation) and, where necessary, improve the formulation of some of the existing outcome indicators.

The new framework must not be limited to monitoring, but must also include an evaluation plan that can, at a minimum, include reviews or evaluations at regular intervals, or evaluative exercises focused on specific aspects of AAP or initiatives, considering also impact assessments.

Recommendation 4: The senior management and the Protection Division should strengthen central AAP functions, ensuring that the size of the AAP unit in IOM Headquarters becomes adequate for meeting AAP strategic objectives and that there is capacity to proactively support country offices in structuring their approach to AAP implementation.

For the follow-up to this recommendation, the following activity should be considered:

- Increase staff resources in regional offices, establishing AAP-dedicated positions or designating focal persons with both technical knowledge and time capacity,²⁶ ensuring these have a clear mandate to undertake AAP tasks effectively and efficiently, and that technical reporting lines to AAP officers in IOM Headquarters are established.

Recommendation 5: The AAP team should support country offices in developing office-wide approaches to AAP implementation and funding, reducing fragmentation.

This recommendation should be based on known cases of office-wide approaches to AAP, such as IOM Ethiopia (Case study 1), where AAP functions are centralized in a specific unit, a network of AAP focal persons has been established, and funding for AAP activities is regularly included in and taken from different initiatives proportional to their budget.

Central AAP functions should establish minimum standards for operating AAP at the country level and should provide different models for the funding and centralization of AAP functions, taking into account different country office sizes, specializations and operational contexts.

For the follow-up to this recommendation, the following activities should be considered:

- Develop specific guidance on AAP system development in country offices, including funding methodologies.
- Establish a fund for supporting select country offices to cover the start-up costs of integrated, office-wide AAP systems. Select recipients of support through open competition

Recommendation 6: The Protection Division and the AAP team should increase the visibility of AAP activities, both internally and externally, on the basis of a clear visibility and knowledge management plan.

The desk review of AAP documentation clearly indicated that an insufficient amount of “visibility” material, including case studies and AAP best practice documentation, has been produced to document AAP activities and their influence on the work of IOM.

It is key that efforts on AAP visibility are formalized in a dedicated plan, formulated by the AAP central unit in coordination with communication specialists, and that country offices are provided with guidance, tools and support on AAP best practices around documentation and visibility.

²⁶ Focal persons are intended to be staffers not fully dedicated to working on AAP, but rather staffers who have AAP responsibilities alongside other responsibilities.

Increasing the visibility of AAP activities should not be limited to producing dedicated material; as well, general communications on IOM interventions should highlight their AAP components and results.

For the follow-up to this recommendation, the following activities should be considered:

- Conduct a comprehensive mapping of AAP activities and approaches, on which the identification of good practices can be based.
- Establish regular dissemination channels on AAP (such as newsletters, blogs and webinar series), with the specific intent of giving visibility to good practice and innovative initiatives.
- Promote the publication and dissemination of case studies on AAP, building on communities of practice and collaboration with other thematic and programme areas.
- Use communications to strengthen incentives for engagement in AAP, including prizes given to best initiatives, solutions and achievements.
- Strengthen current knowledge management practice in AAP.

Recommendation 7: The AAP team should increase training opportunities and update capacity-building material with increased focus on practical AAP implementation and including standard tools and templates, which will have been developed in consultation with relevant field offices, partners and community of practice members.

Informants overwhelmingly indicated that more practical guidance on AAP is needed. Such guidance could include standard CFM SOPs, template feedback forms, off-the-shelf CFM management systems and CFM data analysis dashboards, all of which should be easily adapted to and deployed in field contexts. Training material and capacity-building resources should also be expanded accordingly and should place renewed focus on practical AAP implementation. The training supply should also be expanded, as demand is currently not fully met.

For the follow-up to this recommendation, the following activities should be considered:

- Develop practical guidance material (such as a template and guidance for AAP data-sharing agreements, CFM forms, etc.) based on the requests of field-level AAP focal persons and involving the AAP community of practice.
- Critically review current training methodology and identify ways in which training effectiveness can be enhanced, and in which the notions acquired can be put to practical use. This may include on-the-job training arrangements, training follow-ups, and peer review and engagement.
- Include AAP-related material in the current revision of the *IOM Project Handbook* to bridge the gap between policy and practice.
- Develop and conduct an AAP training-of-trainer initiative.

Recommendation 8: The AAP team should enhance and standardize CFM systems used in IOM through the following actions:

- **Map existing CFM systems.**

- Conduct a comprehensive assessment of all CFM systems currently in use within IOM.
- Identify overlaps, gaps and areas for improvement in existing mechanisms.
- **Establish minimum standards and ensure compliance.**
 - Define clear minimum standards for CFM systems to ensure consistency, efficiency and accessibility.
 - Implement measures to ensure that all mapped CFMs align with these standards.
- **Develop and disseminate CFM-specific materials.**
 - Create guidance documents, training materials and communication resources to support the effective implementation of CFMs.
 - Ensure dissemination across all relevant teams and offices.
- **Move towards standardization and integration.**
 - Work towards harmonizing CFM systems across IOM to ensure uniformity in processes and reporting.
 - Facilitate the integration of CFMs into broader corporate systems for streamlined data collection and analysis.

This recommendation relates to the many findings regarding CFMs in this evaluation, and in particular to how CFM development and management processes are being undertaken in autonomy by different offices or departments within IOM, resulting in duplication of effort and missed opportunities for efficiency and synergy. Central AAP functions are therefore recommended to control and regulate CFM-related processes and outputs more actively.

New guidance on developing and managing CFMs should cover both technological and organizational aspects, with the former focusing on minimum standards and compliance, and the latter promoting the development of office-wide CFM systems with clear processes, roles and responsibilities for the various functions available in the office.

Noting also how CFM development has happened outside of institutional system development and management processes, after having established minimum standards, in particular on data protection, cybersecurity and data utilization (as the prevalent perception of informants was that not all CFM data are analysed and used), IOM should move towards the institutionalization of the more promising CFM systems available within IOM and beyond, possibly through a transparent, open selection process.

Recommendation 9: IOM more broadly, and the AAP team more specifically, should continue the collaboration and engagement on collective accountability, actively participating in coordination structures on AAP, such as IASC-promoted initiatives or initiatives developed in other inter-agency coordination spaces, both at the global and country level.

To follow up this specific recommendation, the following activities should be implemented:

- Disseminate best practices on collective accountability and inter-agency coordination, including on the implementation of joint projects such as inter-agency CFMs or other similar initiatives, and conduct specific training courses on this matter.

- Ensure AAP focal points or dedicated staff have formalized inter-agency tasks in their job descriptions and their terms of reference, and that AAP coordination is part of the overall objectives of designated AAP roles.
- Include AAP resources (staff capacity and funding) to allow for active IOM participation in inter-agency spaces, including co-leading AAP working groups and taskforces when relevant.
- Include collective AAP contributions as a key metric of a revised theory of change and monitoring framework for AAP (linked to Recommendation 3).
- Disseminate the IOM-led inter-agency leadership training on AAP to all IOM senior management.
- Showcase successful experiences of collective accountability within IOM (for example, Ethiopia and Response for Venezuela).

ANNEX A. CASE STUDIES

A.1 Accountability to Affected Populations in IOM Ethiopia

Background

The consultation in Ethiopia, conducted in February and March 2024, involved KIIs with a total of 30 informants and five FGDs with a total of 45 participants. Mehiret Habte led the consultations. This case study is intended to provide valuable information and insight into the global evaluation of AAP within IOM, by focusing on an IOM country office that has built a significant AAP portfolio, encompassing both emergency and non-emergency interventions. Acknowledgment is given to the engagement and support of the MEAL team of IOM Ethiopia, as well as the AAP focal points in the suboffices of the same IOM country office.

Ethiopia Context

In IOM Ethiopia, the overall coordination of AAP rests with the MEAL unit. Three full-time personnel (one programme assistant and two hotline operators), directly supported by one National MEAL officer and the MEAL coordinator, dedicate about 25 per cent of their time to AAP. The other two MEAL officers in the unit are also actively engaged in AAP. The mission also established SOPs, AAP minimum requirements, and a complaints and feedback referral workflow to standardize AAP activities. These efforts aimed to enhance effective community participation and the agency of affected people regarding whether and how IOM works with them.

Different feedback mechanisms are implemented in IOM Ethiopia. These include a front-line help desk, a nationwide toll-free hotline service in five languages (Amharic, English, Afan Oromo, Tigrigna and Somali), exit interviews and community engagement initiatives, which are used to allow communities to provide input on IOM and partners' interventions.

Feedback gathered through IOM Ethiopia's CFMs is consolidated into the Community Voices initiative, a collective dashboard utilized by the IAAWG to analyse trends in evolving community feedback, needs and priorities. At the time of this evaluation, the latest publicly available Community Voices report (December 2023: Figure 7) indicated that there are 44,800 community feedback reports from 29 organizations that have been analysed, highlighting food security as the most pressing concern (IOM, 2023f). The integration of AAP data among the different humanitarian agencies working in the area is a key achievement for the international community in the country. Data gathered for this evaluation suggest that Ethiopia is among the few countries with an active community voice platform.

Figure 7. Print screen of Community Voices, common AAP platform for the international community in Ethiopia



Source: [IOM, 2023f](#).

IOM in Ethiopia promotes the participation of affected people by integrating AAP-oriented approaches into regular data collection exercises. It assesses the effectiveness of AAP mechanisms systematically through tools such as post-distribution monitoring and DTM site and village assessments. In 2023, with the support of the Ethiopia Humanitarian Fund, DTM integrated AAP indicators in its [Site Assessment Round 34 and Village Assessment Survey Round 17](#) tools, which assess the mobility, needs and vulnerabilities of IDPs and returning IDPs across Ethiopia. The analysis of these data led to the publication of an [AAP snapshot](#) and a presentation to the IAAWG that informed its 2024 strategic plan. Enumerators working with IOM Ethiopia on DTM or MEAL activities are trained on AAP and share the hotline number when needed with affected people.

As the co-lead organization for the IAAWG, IOM Ethiopia facilitates regular meetings and knowledge-sharing sessions, as well as maintaining the Community Voices dashboard. In addition, in consultation with IAAWG members, IOM conducted an AAP perception survey to reflect on AAP practices and challenges among humanitarian actors in the country, and to inform the production of information-sharing materials for the working group. Capacity-building training on AAP and related topics was provided by IOM MEAL staff to 121 working group partners in 2023.

Each of the 13 suboffices of IOM Ethiopia have two AAP focal persons who received training (from the central MEAL unit) in AAP implementation and mainstreaming. These focal persons are responsible for liaising with various units in their respective suboffices to ensure that feedback gathered from affected people is addressed. They also support AAP assessments, trainings and community engagement activities such as community committee trainings on AAP, and they document complaints and feedback channels through face-to-face interactions. These AAP focal personnel are initially hired using funding for a specific project to fulfil various

responsibilities and are chosen as AAP focal points based on their educational background, current roles and willingness to assume AAP duties on top of their regular ones.

Key Findings

Relevance

In Ethiopia, IOM implements operations of significant scale due to the high incidence of migration and displacement in the country, often in close collaboration with national and local authorities. This makes the AAP approaches highly relevant to ensure that affected people contribute to decision-making and are able to raise their concerns directly with the Organization.

Informants consulted for this evaluation most often recognized AAP approaches as highly relevant to the management and mitigation of operational risks, especially when implemented systematically. AAP systems were deemed effective when able to generate information useful to anticipate, prevent, report and respond to various risk or threats. The implementation of AAP approaches was generally seen as essential to providing human-centred programming in the Ethiopian context, especially in the context of multipurpose cash assistance and non-food item types of interventions. Some informants noted how implementing AAP is “easier” in the context of programmes targeting settled populations (that is, populations residing in “fixed” locations for extended periods, including IDP camps) compared to interventions targeting individuals in transit, where additional challenges are faced (with AAP remaining nonetheless relevant).

Application of AAP approaches was also seen as key for functions such as displacement tracking, CCCM and PSEAH. AAP-related indicators were integrated into data collection instruments administered by IOM Ethiopia’s DTM unit. Information is being collected on affected people’s knowledge of available CFMs, preferred CFM usage, preferred information channels and perceived levels of participation in decision-making. As the coordinator of 54 IDP sites in Ethiopia, IOM Ethiopia’s CCCM unit was indicated as important in the implementation of AAP approaches due to the daily interactions of CCCM staff with affected communities.

In 2023, IOM Ethiopia’s CCCM unit deployed an automated reporting system for its CFM. This system, called Zite Manager, is used by CCCM help desk officers to collect and register feedback and complaints, which are in turn centrally analysed and shared with the responsible staff in different units for follow-up. This system was perceived as offering various advantages, including easier processing of feedback, strengthened formal communication channels and greater adherence to data protection principles.

Consulted IOM informants strongly believed that creating spaces and mechanisms for affected community members to come forward and communicate their complaints and challenges is important also for the prevention of sexual exploitation and abuse. The absence or weakness of AAP mechanisms was seen as highly detrimental to such prevention. At the same time, the effectiveness of AAP mechanisms in the prevention of sexual exploitation and abuse is conditional on the correct understanding, robustness and systematic implementation of those mechanisms, as well as on the extent to which these approaches can address power

imbalances between humanitarian workers and affected communities. Noting that the awareness of rights and the understanding of how to safeguard against sexual exploitation and abuse is generally on the rise among affected people, AAP mechanisms were perceived as essential to allow instances of sexual abuse and exploitation, suspicious behaviours and situations of feeling unsafe to be effectively reported.

Migrants and internally displaced individuals in Ethiopia may often display heightened levels of vulnerability, with ample evidence being available of abuses and human rights violations being perpetrated against members of these groups, both within and outside of the country. Informants perceived the implementation of AAP approaches as potentially relevant also for preventing human rights violations. For example, the hotline provides a channel for community members to raise concerns and issues related to human rights violations.

Cross-Cutting Issues (Gender, Disability)

Within the protection unit of IOM Ethiopia, a dedicated team oversees PSEAH, gender and disability concerns; AAP staff work very closely with this team. For example, all AAP training courses are coordinated and organized jointly so as to include AAP and PSEAH material together and have trainers from both teams. The disability inclusion specialist is regularly invited to provide inputs during AAP-related events. As the co-chair of the IAAWG, IOM also closely engages with the Gender in Humanitarian Action Working Group, the disability inclusion expert in the protection cluster and the coordinator of the PSEAH network for contribution to strategic planning.

In CCCM settings, women undergo leadership training to enhance their community engagement and decision-making roles. Reportedly, they have a strong representation in community committees, with a growing community acceptance of a 50 per cent women quota, actively facilitating information dissemination, complaints submissions and beneficiary targeting. Additionally, criteria like pregnancy, breastfeeding, and disability are heavily considered in beneficiary selection, as women representatives advocated for their rights, leading to increased female involvement in previously male-dominated roles, such as short-term jobs and cleaning activities.

IOM staff and partners recognized the importance of conducting separate consultations with women, to better understand their perspectives and provide them with a safe space to share personal insights. Adjustments to shelter designs and improvements in sanitation (soap and other cleaning materials) have been made, based on such consultations. This is especially important because in some cases women's feedback has not been taken seriously by organizations that operate in IDP sites. For instance, women in an IDP camp in Tigray who participated in focus group discussions highlighted issues with menstrual hygiene materials, stating that they were provided with reusable sanitary pads instead of disposable ones, creating challenges in camp settings due to the scarcity of water and the discomfort of washing such personal items in crowded shelters. Additionally, efforts were underway to raise resources to hire female hotline operators to facilitate discussions on gender-sensitive issues, such as GBV.

Data gathered for this case study suggest clearly that actions were being taken within IOM Ethiopia to ensure the representation of people with disabilities in various settings, including their active involvement in community and camp committees. This was perceived as a positive development, with consequences such as more effective service provision and more accessible camp infrastructure. Additionally, the integration of disability-related considerations into monitoring tools was ongoing, reflecting a commitment to strengthening inclusiveness and responsiveness. However, as visible disabilities were perceived as receiving relatively more attention, challenges were acknowledged in addressing less visible forms of disability. For instance, at the time of data collection, there were no operational mechanisms for information sharing for people with a hearing impairment, including no CFM adapted for the hearing impaired. Hotline services, in particular, may be impractical for individuals with such disabilities. Intellectual disabilities were also mentioned as something to be considered in relation to increasing the accessibility of communication material and CFMs.

Coherence and Integration

Coherence and coordination within IOM

Consultations held as part of this case study suggest that IOM Ethiopia has been implementing AAP approaches for some time, although not always labelling these initiatives as AAP. For example, engaging members of affected communities through the establishment of camp committees or through information sharing was a common feature in different interventions even before the formalization of AAP approaches within the country office.

The adoption of the comprehensive AAP Framework in IOM Ethiopia sought to formalize and systematize the various ongoing AAP-related initiatives, and also to increase their effectiveness. An example is the collection and processing of complaints and feedback, which was initially conducted with different solutions and approaches by different units or projects. The Zite Manager application was developed specifically for harmonizing complaints and feedback collection practices within CCCM functions, by providing a single solution. This application was perceived as having significantly enhanced the efficiency and effectiveness of these processes.

To ensure coherence across programmes, IOM Ethiopia mandated training on AAP and PSEAH for all staff.²⁷ Collaborative training by PSEAH officers and the AAP teams avoids misconceptions about separate CFM systems. The handling of PSEAH-related reports follows specific procedures, and all IOM staff with whom a PSEAH-related allegation is shared, including hotline operators, are expected to report these directly on the institutional We Are All In reporting platform, regardless of how the report was made in the first place (whether directly to the staff member or through an available CFM). In the context of IOM Ethiopia, AAP focal persons follow-up on non-sensitive complaints and focus on the formulation of feedback related to programmes for IOM and partners. In IOM Ethiopia suboffices, AAP focal persons often also serve as PSEAH focal persons, potentially strengthening linkages between the two domains.

²⁷ This differs from global institutional practice, where AAP training is not mandatory.

Informants highlighted some of the challenges pertaining to the coherence of AAP in IOM Ethiopia. These include inconsistent CFM mechanisms: the Zite Manager solution mentioned above is not used across all programmes and functions and plans to expand its usage have not been implemented due to a lack of resources. Some alternative programme- or project-specific CFMs are in place, and their operation is not necessarily coordinated with the work of the AAP focal persons. A second challenge is that some complaints remain unanswered, either by IOM or by implementing partners, sometimes because complaints may be challenging to address, and other times because addressing them is beyond the capacity or scope of IOM or its partners. An example of the latter is the suspension of food aid by donors in 2023, which was beyond the direct control or influence of IOM Ethiopia. A third challenge noted by informants, this one with respect to the AAP focal persons, is that sometimes AAP activities became secondary to other responsibilities due to workload, directions received from supervisors, or the lack of specific incentives to undertake AAP duties on top of “normal” responsibilities. A fourth challenge observed by informants was the way that some colleagues essentially intend AAP as mere CFM management, without recognizing or engaging with the broader scope and depth of AAP principles and approaches.

Inter-Agency Coherence and Coordination

The IAAWG was launched in 2009 by organizations seeking to improve accountability processes. This initiative facilitates inter-agency cooperation and coordination in Ethiopia. The terms of reference were developed in 2013, followed by a memorandum of understanding in 2019. The group operates with rotational leadership and is currently chaired by IOM and co-chaired by Plan International.

The primary objective of the working group was to achieve horizontal and vertical harmonization among member agencies by standardizing AAP frameworks, indicators and measurement methods. Over time, the working group came to acknowledge that the diversity in AAP frameworks and approaches among member organizations was a value rather than a limitation, shifting its focus to sharing best practices through a community of practice.

Standardized reporting tools for CFM data have been developed, albeit in manual Microsoft Excel-based formats, with ongoing discussions on how to automate the template for greater efficiency. The consolidated data are analysed using Microsoft’s Power BI to produce the [Community Voices report](#), which is meant to inform planning and decision-making at cluster and humanitarian country team levels. However, less than half of working group members are actively engaging with this initiative.

Coordination with regard to AAP between IOM and other agencies in the IDP camps settings, where IOM is responsible for CCCM, was also observed to be in place. However, according to informants, only 60 to 70 per cent of all complaints are answered: in some instances, complaints and requests for services are shared with CCCM staff by community members, but either there is no service provider in the area able to provide the requested service, or service providers present are unable to respond to the complaints.

Effectiveness

Informants consulted for this case study largely perceived that affected communities are becoming increasingly aware of their rights and entitlements, leading to an increase in complaints and to the proactive provision of feedback. The effectiveness of the AAP Framework was evident, with instances of reports of aid diversion. In response, The IOM MEAL team investigate and implement corrective measures, including, as a last resort, the temporary suspension of aid distribution. The application of AAP to aid distribution entails the involvement of community representatives in the targeting and selection of beneficiaries, as well as the active engagement of community committees in the operationalization of CFMs.

The CFM reporting system utilized in camp settings was seen as effective for documenting complaints and queries from IDPs, assigning a unique number to each case for follow-up. Reports are centrally managed, analysed and shared with internal units and external partners for resolution. SMS text messaging was seen to be effective in informing beneficiaries about their entitlements.²⁸

Resort to hotline services has been growing, with utilization peaks reached during needs assessments, large-scale awareness campaigns, as well as during the onset of crises that create displacement. The hotline is a popular channel for voicing complaints, particularly for addressing sensitive issues like aid diversion, as it is easier for a caller to remain anonymous. The hotline data are also managed using a complaint-handling flow process that aligns with internal and IAAWG CFM guidance.

Some challenges were mentioned concerning the effectiveness of hotline services. These include the fact that operators may not be familiar with all IOM interventions in the country (or those of other humanitarian actors), and that some reports inevitably go beyond the scope and reach of IOM operations. Additionally, phone network disruptions may make hotline services inaccessible, limiting the effectiveness of this channel in crisis situations where disruptions tend to be severe and protracted. Nevertheless, according to IOM Ethiopia's complaints and feedback overview of January–June 2023, 73 per cent of complaints and feedback were addressed in a timely manner.

Repeated complaints in IDP camps (for example, those in Tigray) on issues such as shelter maintenance, electricity and medical coverage for chronic illness (people with advanced age) to IOM and other partner organizations lead to beneficiary frustration. While some dissatisfaction stems from gaps between available support and community needs, other dissatisfaction arises from misconceptions about aid eligibility and unrealistic expectations. The comprehensive involvement of all partners, together with detailed information sharing regarding the project scope and capacity, were deemed as essential to address diverse needs comprehensively and efficiently.

An assessment of satisfaction with AAP mechanisms is integrated into post-distribution monitoring surveys. In the first half of 2024, 98 per cent of respondents (N=2271) reported

²⁸ The Socio-economic Reintegration of Ex-combatants (SERE) project piloted text messaging before the hotline was established in 2021. During this pilot phase, the hotline operation was restricted to recording messages.

that their views were taken into account by IOM with regard to the assistance they received, and 99 per cent reported that they felt well informed about the assistance and services available. In addition, 97 per cent thought that they could channel their suggestion or lodge a complaint if they had one, and 87 per cent of respondents reported that, to their knowledge, suggestions and complaints raised were responded to.

Efficiency

Mainstreaming AAP into existing programmes is currently achieved through ensuring that each project contributes a certain percentage of the costs of a dedicated staff member and by allocating a specific percentage of the budget from each project to cross-cutting issues, including AAP. This strategy is a good practice that allows the MEAL team to continuously conduct AAP activities. This approach ensures the sustainability of key elements of IOM Ethiopia's AAP approach, such as the hotline and field staff capacity-building, as well as the ability to respond to programmatic needs and requests. It is to be noted, however, that hotline operators are not on staff contracts, which may jeopardize their willingness to remain with the Organization.

AAP focal points in suboffices (existing staff members include roles such as the WASH coordinator, the sexual and reproductive health officer, and the protection associate, who are designated as focal persons to oversee AAP initiatives on top of their "regular" responsibilities) are also a key feature of IOM Ethiopia's AAP approach. These focal persons are chosen in consultation with the heads of suboffices. This arrangement is deemed to be cost effective, as it does not entail additional staff costs, while also yielding significant benefits. The focal persons are able to conduct community, staff and stakeholder training courses, contribute to AAP assessments, and channel, refer and respond to complaints and feedback in line with the expected standards. However, as the AAP-related tasks are added to the focal points' primary duties, their timely completion relies heavily on available time and the readiness of staff themselves and their direct management to dedicate time for AAP. No system is in place to formally acknowledge achievements or address underperformance concerning AAP-related tasks and responsibilities specifically.

In general, the mechanisms available for quality control of AAP activities are insufficient. While the satisfaction of beneficiaries with AAP mechanisms are verified in monitoring and evaluation surveys, there are no "deeper" methods to verify the quality of the response in place, such as recording of calls, or ad hoc verification of referral effectiveness. AAP and CFM operators are not systematically trained in all areas in which they may be required to respond, in order to be able to respond appropriately to diverse beneficiaries and causes for complaint; such areas can include PSEAH, child protection, response to violence towards marginalized or vulnerable groups or psychological first aid. The wellbeing of AAP and frontline staff who are responsible for receiving feedback and complaints is also not systematically monitored.

The strategy of assigning AAP responsibilities to staff in different roles is also observed in inter-agency cooperation. MEAL and information management officers from organizations like IOM, Plan International, and OCHA are often responsible for CFM data management. This is deemed to be efficient in terms of leveraging existing expertise and mainstreaming AAP principles.

However, the presence of a dedicated AAP adviser or coordinator supporting the IAAWG and its co-chairs is seen as essential to ensure coherence and maintain momentum in AAP implementation. The role requires significant technical expertise and coordination capacity. At the time of the evaluation, while an AAP adviser had been made available through stand-by partner agreements with IOM (in 2023) and OCHA (in 2024), no sustainable funding mechanism was in place to ensure the continuation of this role, putting in potential jeopardy the progress made in the previous years.

Impact and Results

The toll-free hotline service established by IOM Ethiopia was perceived as a valuable resource. DTM teams have been informing communities of the hotline service, increasing the volume of calls. The fact that the service is toll free was also seen as important to facilitate access by affected people. The Community Voices dashboard is seen as an important achievement as it makes analysed CFM data available to a wide range of stakeholders, including civil society. This is done with the intent of informing decision-making.

While a proper impact assessment is outside the scope of this evaluation and case study, examples were provided of how AAP implementation led to changes in assistance provision, including administrative measures such as staff dismissals or partnership discontinuations due to misconduct. In one case, community complaints regarding discrepancies in cash assistance due to currency exchange rate variations from United States dollars to Ethiopian birr led IOM to a change in the conversion method, to ensure that cash grant amounts are based on the latest exchange rate. In another, reports of food aid diversion made by affected people prompted the establishment of a dedicated task force to investigate the reports and take action. The integration and application of AAP within the food cluster was also perceived as impactful.

Sustainability

The systematic integration of AAP into projects (“mainstreaming”) requires that AAP components are included from the design stage and that budgets allocate resources specifically to AAP. As mentioned already, projects developed by IOM Ethiopia do often include a dedicated AAP budget allocation, and AAP is integrated into projects’ narratives. This is not formally required in IOM at large but only recommended. As a result, the mainstreaming of AAP in IOM Ethiopia’s programming remains subject to mission decisions and priorities, notwithstanding the fact that this country office made a significant effort and dedicated significant resources to AAP. Some informants pointed out how AAP is still not prioritized as it should be in project design and implementation. One informant stated that, in a situation where stringent budget constraints are faced, AAP is highly likely to be the first thing to be sacrificed.²⁹

AAP implementation success also critically depends on understanding its concepts and technical aspects. Training was seen as necessary to this process, but not entirely sufficient, as

²⁹ As informed by discussants, having PSEAH officers is mandatory for every IOM mission; however, there is no similar requirement in the case of AAP. Thus, AAP application is mainly being implemented by focal persons.

direct experience and the availability of dedicated support were also seen as key to real internalization. At the time of the consultations, AAP training courses targeting staff in suboffices were ongoing.

The toll-free hotline service – a “milestone” achievement according to some informants – was generally perceived as fundamental to IOM Ethiopia’s core programming and as being effectively maintained. However, some informants pointed to the risk of reducing AAP to mere CFM management, remarking how relying solely on the hotline is insufficient to follow AAP principles in a broader sense.

AAP indicators have been integrated into monitoring and evaluation tools and activities, and the DTM surveys, to facilitate regular monitoring and assessment processes. However, there is no dedicated theory of change for AAP, nor a consolidated and comprehensive monitoring framework. Additionally, as mentioned already, some informants lamented the absence of “deeper” assessments into the quality and effectiveness of AAP-related activities.

Most of the mainstreaming efforts are managed by focal persons at different levels. Responsibilities associated with AAP in most cases are not considered as part of the main role and responsibilities of such focal persons. No evidence was found regarding whether assuming AAP-related responsibilities is recorded in formal documents such as the terms of reference of the staff member’s position.

Lessons learned

The integration of AAP indicators in data collection processes, particularly regarding community preferences with regard to information channels, participation modalities and CFMs, has proven to be very effective in advocating for resource allocation to AAP and demonstrating the need to fine-tune AAP activities based on the context. Indeed, these data in Ethiopia have shown that preferences and practices vary widely from region to region, with significant differences in terms of preferred language, medium, community structures for accountability, trust in international organizations, government officials or other stakeholders, and so on. This integration has informed IOM approaches but has also contributed to ensuring that the IAAWG strategic plan for 2024 was informed by this evidence.

While AAP capacity was initially centralized in the Ethiopia Country Office in Addis Ababa, efforts to train frontline and suboffice staff since 2023 have contributed to creating a common understanding of AAP across the different operations of IOM. These efforts have also led to increases in the perceived value of AAP activities performed by programme staff, as well as to more frequent solicitation for AAP-related support (for example, to conduct assessments, facilitate stakeholder or community trainings, or set up CFM desks during distributions). AAP focal persons in IOM Ethiopia suboffices play a key role in meeting the growing demand for AAP-related support.

AAP assessments show that beneficiaries often seek information or raise complaints to security or cleaning staff in offices or migrant centres, as they are often easier to approach. The AAP-oriented trainings targeting these staff categories specifically were greatly appreciated.

Activities that aim to raise the awareness of community members on entitlements and rights, and to increase the direct involvement of community members and structures in AAP activities, are important to make humanitarian and development actors more accountable. Activities such as training a community committee to disseminate information, collect and convey feedback, or verify targeted beneficiaries have been observed to lead to positive feedback about IOM responsiveness to the community's needs, and to mitigate risks such as aid diversion. The development of AAP guidance, SOPs and other key documents benefited greatly from participatory processes with field colleagues. For example, the SOPs for the integration of AAP and PSEAH in cash and in-kind interventions were discussed, amended and validated during a full day workshop with the AAP focal points from the different suboffices, to ensure they are operational and adapted to field offices' capacities and contexts. This process was deemed to have improved the quality of the final document and facilitated buy-in from the colleagues expected to implement those SOPs.

Recommendations

1. Define a comprehensive monitoring framework for AAP in IOM Ethiopia, including a theory of change, and monitor the implementation of the AAP strategy.
2. Review IOM Ethiopia's practice of allocating a share of the budget to cross-cutting priorities, including AAP, in all projects, to ensure that the allocations are sufficient to implement core essential AAP activities.
3. Formalize the AAP focal person role, by among other things including specific tasks and responsibilities in the terms of reference of the staff concerned and adding AAP-related goals to the staff performance evaluation framework.
4. Implement various compensation and recognition mechanisms, like certificates of recognition, to incentivize engagement as AAP focal person.
5. Strengthen the integration of disability inclusion perspectives into AAP activities, addressing various types of disabilities – such as hearing impairment – within information sharing, community engagement and complaints mechanisms. Explore collaborative mechanisms with national and regional organizations for persons with impaired abilities.
6. Strengthen a gender-responsive approach to AAP, notably with the recruitment and training of female hotline operators.
7. Design and implement a comprehensive training course for hotline operators and CFM desk staff, inclusive of key principles of PSEAH, child protection, response to violence against marginalized and vulnerable individuals, and psychological first aid, as well as self-care and resources for staff well-being.
8. Reinforce quality control of CFMs, through random verification of referral effectiveness, recording hotline calls for learning purposes and regular debriefings with CFM operators.
9. Advocate for and contribute to stable and consistent funding for an AAP adviser position for the humanitarian response in Ethiopia through collaborative mechanisms with other key AAP actors in the country and in the IAAWG.

A.2 Accountability to Affected Populations in IOM Türkiye

Background

Consultations in Türkiye took place between 4 and 8 March 2024 and were conducted by the evaluator. These entailed 12 KIIs, as well as five FGDs attended by a total of 57 individuals (26 women and 31 men). Consultations were conducted in the IOM Ankara Country Office and in the Gaziantep Suboffice.

Türkiye was selected for a case study following the suggestion of the AAP unit in IOM Headquarters, with the intention of focusing on AAP in the context of IOM Türkiye's cross-border operations with Syria. The evaluator decided to also include in the scope of the consultations AAP-related initiatives undertaken for IOM Türkiye's refugee response operations, in order to gain a more comprehensive view of AAP in the country office and to see how AAP activities undertaken by the two different programmes interrelated. Additional interviews were also held with programme officers in Ankara not working on either of the two initiatives, to gauge the extent of AAP implementation in other operational domains.

Türkiye Context

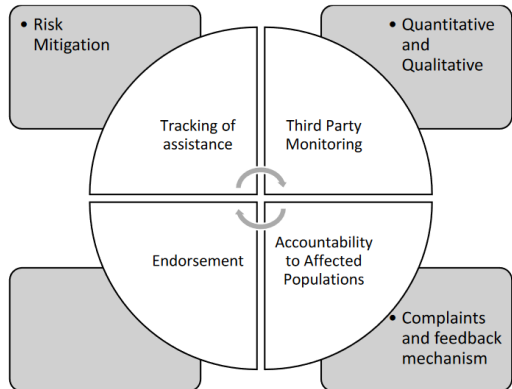
In IOM Türkiye, at the time of this evaluation, there was a structured CFM specifically set up for the cross-border operations between Türkiye and Syria. This system was managed from the Gaziantep Suboffice by the cross-border programme. Another CFM was set up for the refugee response programme and was led by the monitoring and evaluation unit, also in Gaziantep. The monitoring and evaluation unit and the cross-border programme unit were observed to work quite independently of each other.

The monitoring and evaluation system for cross-border operations was designed in a context where implementation relied to a large extent on the implementing partners, and IOM needed an effective system to monitor progress and assess whether or not the programme activities were being executed properly. As illustrated in Figure 8, the monitoring and evaluation system was articulated in three components: a commodity tracking system; third-party monitoring; and AAP. The commodity tracking system applied a unique barcode-based identification number to every single kit delivered to beneficiaries,³⁰ allowing the beneficiary to confirm whether they received the assistance or not. Third-party monitoring was implemented by Kudra Social Development Solutions, a partner with presence in both Syria and Türkiye (Gaziantep) contracted by IOM to manage beneficiary verification, distribution monitoring and exit interviews, post-distribution monitoring, and satisfaction surveys. A CFM designated as the "Dialogue, Information and Participation System" (DIPS) was established in late 2018. It consisted of a hotline together with mechanisms to share information and collect complaints and feedback via WhatsApp. Figure 8 also refers to "endorsement": an important responsibility

³⁰ According to IOM Türkiye officers, the commodity tracking system tracks the movement of humanitarian supplies from the IOM warehouse in Gaziantep to the intended locations in Syria. The system allows IOM to know that a shipment reached its intended delivery location, and the specific time it did, which strengthens accountability and transparency in all distributions. Every kit released from the IOM warehouse is tagged with a unique QR code. Each QR code bears information of the type and quantity of each item included in the kit. Warehouse staff scan the QR code upon release of the kit from the warehouse. Once kits arrive in partners' warehouses and during distributions, partners scan the QR code using GPS-enabled mobile devices. Thus, each QR code is linked to a recipient beneficiary. The data for location, date and time of distribution, and beneficiary details are automatically uploaded to a secured and encrypted server.

of monitoring and evaluation functions in the context of cross-border operations was to confirm that no “red flags” were raised during the implementation of the activities, allowing for the release of payment to implementing partners.

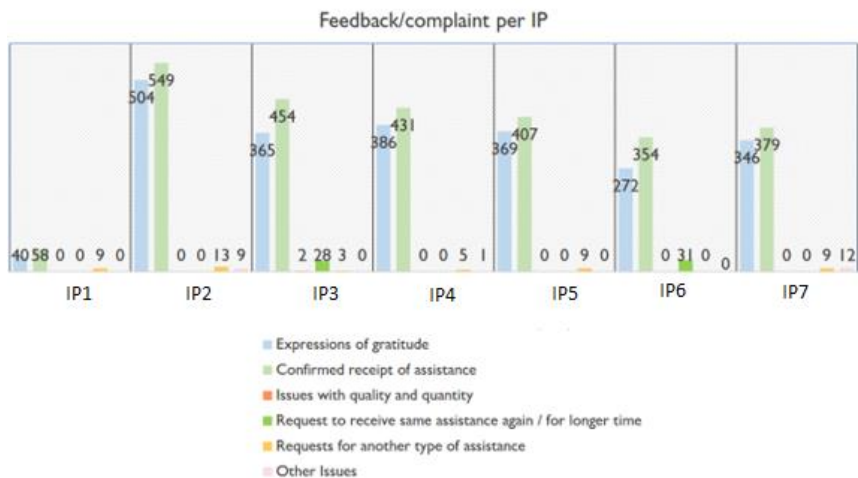
Figure 8. Model of the monitoring and evaluation system set up for cross-border operations in Türkiye/Syria



Source: Unedited documentation provided by IOM Türkiye.

Figure 9 provides an overview of the types of feedback received regarding the activities executed by various implementing partners in the month of November 2023.

Figure 9. Types of feedback received from the Dialogue, Information and Participation System report for November 2023 regarding the activities of implementing partners



Source: DIPS report, November 2023.

Data were also collected for post-assistance monitoring purposes in the context of the refugee response programme. The team in charge of these cross-border operations had set up a multilingual hotline and developed a dedicated CFM application to track the calls and manage different types of requests received.

The two CFMs worked independently and were designed as different solutions for different programmes, with no evident attempt to explore synergies.

Key Findings

Relevance

AAP as a concept is relevant for IOM Türkiye and there was growing awareness of it, although not uniformly across all thematic areas and programmes. There were different CFMs in place and their management was primarily considered to be the responsibility of those running monitoring and evaluation processes. Other types of AAP initiatives (for example, information sharing, participation in decision-making and project adaptation) were also being undertaken, with programme teams considered directly responsible for them.

Consultations conducted for this case study suggest that the available global guidance on AAP had limited influence in shaping the local AAP strategy and work. A need and demand for more specific guidance and tools (SOPs, “off-the-shelf” systems) was voiced: one IOM staff member interviewed said “more guidance on how to operationalize certain activities would be helpful”. Informants confirmed that IOM Türkiye received some support from IOM Headquarters in establishing AAP initiatives. At the same time, IOM Headquarters was seen by an informant as “requesting rather than providing support”, considering the balance between the amount of support available for the implementation of new policies and the requests and expectations from different departments in IOM Headquarters. In the context of the refugee response, the SOP for the cross-border operations CFM was reviewed by IOM Headquarters and the feedback received was deemed to be useful.

In terms of whether AAP in IOM Türkiye considered cross-cutting issues, the evaluator observed that special consideration was given to women. Concerning the inclusion of people with disabilities, some interviewees mentioned that visits were being conducted to hear their concerns and suggestions. A senior IOM staff member mentioned that disability was an area of work and concern receiving growing attention in the mission. Focal points for disability were said to have been nominated for some programmes. Conversely, no evidence that consideration was being given to environmental sustainability could be found.³¹

In general, most informants did not feel that AAP was a priority for IOM Türkiye, especially as a restructuring of the office entailing a reduction of personnel was ongoing at the time of the consultations. A senior staff member of IOM Türkiye mentioned that expectations from donors in terms of AAP often did not correspond to the resources made available for the implementation of these initiatives and for monitoring and evaluation more generally.

Coherence

Limited coherence and coordination of AAP activities across different programmes could be observed. Internal reporting lines for AAP differed across different programmes, and were subject to change. AAP initiatives were in some cases perceived as advanced and comprehensive, although also fragmented, with no apparent effort to find synergies between them.

³¹ As explained in Finding 1.3, environmental sustainability is never mentioned in IN/285 as one of the cross-cutting themes to which AAP can contribute to.

Not all informants consulted in IOM Türkiye were aware that IN/285 is mandatory in the Organization, with some reducing AAP to the mere management of CFMs. As with other cross-cutting internal policies, the adoption and coherent management of AAP was perceived as challenging. In addition to the fragmentation mentioned above, informants noted as challenging the lack of global guidance concerning CFMs, including on the legal and practical aspects of their operation and data management and usage. At a more general level, informants identified the “projectized” nature of the IOM funding structure, and the insufficient availability of resources for mainstreaming policies (never mind the resources to establish and manage systems that work across the Organization), as a fundamental challenge.

In some ways, IOM Türkiye reflected the challenges and overall situation regarding AAP in IOM Headquarters, where the ongoing restructuring and unclear repositioning of the AAP portfolio were causing uncertainty and limiting coordination and implementation capacity around these matters. The lack of a comprehensive response to AAP was felt against the backdrop of a growing awareness of this framework and its relevance, although some informants doubted whether the level of awareness of the senior management of IOM Türkiye on global AAP policy was adequate.

Collaboration on AAP between IOM and other organizations was observed to be limited, as IOM was perceived as working more autonomously than other United Nations agencies. The awareness of governmental partners of AAP was not assessed specifically, but it was observed that CFMs and community engagement initiatives led by local government agencies were in place; there was, however, no clear connection between these initiatives and the IOM ones. Some informants noted that, initially, government agencies did not seem to understand the value of engaging with communities, but that their attitude changed after activities in community spaces were completed and started bearing fruits.

Effectiveness

As already described, at the time of this evaluation, there was a monitoring and evaluation system in place for cross-border operations in IOM Türkiye, as many activities were carried out by implementing partners and not directly by IOM. Some informants perceived this system as costly and of uncommon scale for IOM standards. Monitoring and evaluation data and findings, including from the CFM, were recognized as useful to inform adjustments to programming, but not necessarily sufficient to inform strategic decisions or organizational change in a broader sense. Some informants also perceived that the data gathered were not being fully utilized.

The multilingual hotline deployed for the refugee response programme was relatively new, and potential users were being targeted by communications to inform them of this service. Some informants mentioned that complaints and concerns were often received by field staff directly rather than through dedicated communication channels, explaining that this was happening because IOM staff were generally perceived by beneficiaries as open and supportive. Some challenges with the management of the CFM were mentioned, often in relation to translating feedback into concrete adjustments or learning. In the words of one survey respondent from Türkiye, “Complaint and feedback mechanism remain a challenge on how to use these successfully.”

Examples of programme adaptation triggered by feedback received via the CFMs were provided both in the context of refugee response and cross-border operations. For instance, the schedule of vocational training sessions was changed to allow easier participation by those working regular hours; the expansion or introduction of cash-based interventions in both contexts followed preferences shared by beneficiaries; the introduction of Turkish language courses followed requests from female beneficiaries; and school transportation services were adapted to better serve needs.

Examples of insufficient or slow adaptation were also gathered. According to some stakeholders consulted, the assistance received from the cross-border programme was not always aligned with the needs of people: for example, food kits were perceived as not relevant but humanitarian programming took a long time to adjust to feedback. The assistance was perceived as following a “pre-planned” model that could not be changed easily (or at all), even if feedback was provided. Local communities were known to complain that livelihood projects were limited, demanding more structural interventions to promote economic development (something not necessarily within the scope of the ongoing interventions). Finally, the limited participation of local councils or community leaders in needs assessments was mentioned, stressing how this can affect the overall efficacy of AAP.

Efficiency

Data gathered for this case study suggest that there were limited linkages between programme units and monitoring and evaluation functions. Moreover, according to an informant, monitoring and evaluation activities were sometimes left “out of the loop”. The same informant perceived that many colleagues still viewed monitoring and evaluation as an audit process rather than something that facilitates learning and project adaptation. Processes for running AAP mechanisms were generally not perceived as streamlined and a demand for more in-depth and practical AAP training was voiced, as webinars and other “virtual” forms of dissemination were not perceived as sufficient.

Several informants noted that acting on some of the complaints received was more difficult than what it should have been. Answering such complaints sometimes took longer than expected and doubts persisted on what constitutes an efficient channel or solution to manage feedback efficiently. Internal coordination between different teams within IOM was seen as limited, and it was not always clear how to secure resources for concrete follow-up actions, such as sharing vehicles for reaching far away locations for beneficiary visits. Another set of difficulties identified focused on how the ability of beneficiaries to express their concerns and liaise with IOM in order to find solutions was constrained by the beneficiaries’ lack of contextual information, lack of literacy and vulnerability.

The limited collaboration between IOM and other United Nations partner agencies mentioned above may have had repercussions on efficiency, as well as on coherence. One informant stated that sometimes the issues raised by beneficiaries went beyond the reach of IOM, and pointed to the difficulty of coordinated responses. The same informant also explained how the lack of coordination is fatiguing for affected people, especially when similar questions are asked by different organizations, and when responses do not follow the questions (“In some

locations, people do not want to talk – they think they have said enough. Many organizations are asking [the same] questions – it is discouraging”).

Impact and Sustainability

No clear sign of broad impacts stemming from AAP activities could be identified, possibly due to the way that AAP in IOM Türkiye was siloed within specific programmes, and that its purpose was understood to be more about informing project-level adaptations than supporting a broader strategy entailing cultural or organizational change across the country office. Assessing the degree to which AAP activities are promoting the empowerment of affected persons is difficult. One survey respondent from IOM Türkiye stated, “There is experience of collecting feedback, but how to evaluate impact is something we have to work on.” Another stakeholder reported how too much surveying may be detrimental to empowerment, as too much energy is devoted to asking instead of emphasizing how communities can organize themselves and address their needs. The effort put into collecting data was also seen at times as disproportionate vis-à-vis the likelihood this would have triggered change.

The “projectized” funding structure of the Organization, together with a prevailing culture where “aid” delivery is central, but less consideration is given to learning and the long-term sustainability of the interventions undertaken, are seen as posing fundamental obstacles to AAP mainstreaming. One survey respondent from IOM Türkiye stated that “programmes usually are defensive or dismissive when reacting to beneficiary feedback. Lack of resources for AAP units makes it difficult to follow up on feedback and causes a lack of credibility of the whole function.” This points at the need for more structural investment in AAP, with the full and continued support of IOM Türkiye’s leadership.

The experience of community-led projects was seen by one of the interviewees in Gaziantep as highly relevant to AAP and worthy of careful evaluation or even impact assessment, primarily to better understand issues around participation and community empowerment. There is growing awareness in the humanitarian sector of the importance of empowering local communities to be more resilient to future shocks, and this is a further reason why AAP initiatives like community-led projects are so important.³² The development of a community-led project involves six steps: consultation (community consultation and FGD, to understand the dynamics of the communities); design (the communities’ and stakeholders’ contributions); implementation (to ensure that activities are participatory); monitoring (using quantitative and qualitative data); handover (to the community group or government); and evaluation (to assess the results and use them to enhance community impact). Examples of community-led projects mentioned by informants include building safety areas for children, developing communal spaces such as communal tents, and breast cancer awareness activities.

In its engagement with community-led projects, IOM is identifying community projects and conducting a neighbourhood profile. IOM is setting up community groups and trying to identify their needs (for example, a request for the refurbishment of a bread-making company), making links and referrals to other areas (such as health or education), and giving assistance in areas

³² See the [Flagship Initiative](#) by OCHA.

such as safety, gravelling of the land to prevent flooding, and communal use activities. IOM is following up with community groups, trying to monitor financial aspects and giving information sessions to inform about specific risks (for example, providing basic information on the proper use of fire extinguishers, communal light, and traffic safety). In the words of a staff member, “I believe community committees established, trained, and supported by IOM projects are good community systems that will ensure continued AAP beyond closure of IOM projects. Resources and capacity development need to be allocated for these committees to build their capacities and be able to continue their roles beyond projects.” Although community committees are distinct from community-led projects, they have overlapping benefits in that they are both examples of sustainable participation mechanisms which empower communities and help secure the future sustainability of the support provided by IOM.

Lessons Learned

- Senior management support was crucial to initiate AAP in IOM Türkiye. In particular, early senior management support was crucial to help set up the AAP mechanisms for cross-border operations.
- Training courses on AAP were key for governmental buy-in on AAP. Training government partners in Ankara on AAP was key to secure support and buy-in for AAP initiatives and to create awareness of the importance of consulting communities, especially in terms of the potential for learning and adaptation.

Recommendations

1. **Develop an integrated AAP strategy for the IOM Türkiye Country Office as a whole, rather than a separate one for each programme.** Place the responsibility for AAP within the programme supervision unit in collaboration with those responsible for monitoring and evaluation, and develop an office-wide strategy for IOM Türkiye, integrating the different tools for enhanced efficiency.
2. **Increase coordination on AAP with other United Nations agencies and other relevant actors to foster collective accountability.** Join efforts for collective accountability in Gaziantep and in Ankara or set up coordination for AAP when these are not available. Assess respondent fatigue and duplication in data collection to solve these issues as a priority.
3. **Invest more in community-led programmes. Change the approach from “what do you need?” to “what can we do together to improve?”** Plan AAP initiatives with sustainability and empowerment in mind as opposed to only consultation on needs. Ask different questions that do not focus on needs but also on the possible contribution of affected people to change their lives and collaborate with IOM and other United Nations agencies.
4. **Improve in managing the expectations of affected people, while also making them more aware of the services available (such as the hotline).** The AAP consultations were sometimes deemed to have led to increased expectations, which were then left unmet. Information and consultation protocols should be reviewed to better manage

expectations and make affected people more aware of the services provided and the accountability mechanisms in use.

5. **Further invest in AAP training, emphasizing practical applications and on-the-job forms of training.** In coordination with IOM Headquarters, training should be available to all staff of IOM Türkiye and should be offered regularly to help incorporate AAP principles within the organizational culture. Targeted staff should receive hands-on training regarding practical aspects of AAP, also through on-the-job forms of training and in collaboration with peers from other IOM country offices with AAP portfolios.

ANNEX B. EVALUATION MATRIX

Evaluation criteria	Key question(s)	Indicator(s) data/criteria	Collection method(s)	Data source ³³	Method for data analysis
Relevance	EQ1: To what extent is IOM's AAP approach relevant and aligned with the needs and priorities of IOM Member States and the United Nations system (IASC commitments in particular), and of the affected populations and beneficiaries IOM assist?	1.1. Level of alignment of IOM's AAP Framework with IASC guidance and agreed priorities of member states and United Nations system 1.2. Level of alignment of IOM AAP approach to needs of affected populations and beneficiaries	Desk Review KII, Survey FGD KII FGD KIIs FGD Survey	IASC Global policies on AAP, IOM's Strategic Plan, IOM Staff UN Partners, IASC Affected Populations IOM Staff at HQ, Regional and local levels.	Content Analysis Descriptive Statistics
	EQ2: Are IOM's AAP mechanisms and guidance relevant for IOM offices to enable programming and implementation of AAP in its interventions?	2.1. Extent to which countries are using AAP Framework and tools 2.2. Extent to which countries assess AAP Framework and tools as useful and relevant	 KIIs Desk Review	 AAP's policy papers AAP Framework AAP Training materials	
	EQ3: How does IOM's AAP approach consider IOM cross-cutting issues of human rights, gender equality, disability and environment?	3.1. Extent to which IOM's approach consider cross-cutting issues and gives practical guidance on how to address them 3.2. Extent to which AAP initiatives on the ground address cross-cutting issues	 KIIs Desk Review Survey KIIs FGD	 IOM Staff at global, regional, and local levels IOM Staff at HQ level Rightsholders at a local level IOM Staff at a local level	
	EQ4: To what extent were "relevant marginalized groups" defined/identified by rights-holders themselves?	4.1. Level of engagement of "relevant marginalized groups" in the IOM AAP Framework and tools in their design phase 4.2. Level of engagement of "relevant marginalized groups" in IOM AAP initiatives.	 Survey KII FGD Desk Review Desk Review	 Partners (donors, UN, IASC) IOM Staff Report on AAP's work annually Affected Populations	

³³ See the bibliography for full references to texts listed [here](#).

	EQ5: Are there institutional comparative advantages for AAP approach, which can be identified in the Organization's mandate, to support further advancement in the fields of AAP?	5.1. Comparative advantage of IOM In AAP as Identified by partners 5.2. Lessons learned of AAP In the context of migration Initiatives and projects	KII Desk Review KII FGD	IOM Staff Local project documents IOM Staff Affected Populations	
	EQ6: What mechanisms are in place to guarantee that the design and implementation of IOM interventions address power dynamics between affected populations and local and international entities?	6.1. Evidence of initiatives giving voice and space to traditionally excluded populations and providing an environment conducive to their inclusion 6.2. Evidence of IOM AAP Framework and tools addressing power dynamics	Desk Review KII FGD	IOM Staff AAP Framework AAP Tools	
Coherence	EQ7: Which mechanisms are in place to guarantee internal coherence for the inclusion of AAP principles and commitment in relevant IOM areas of work?	7.1. Level of coordination within IOM related to AAP principles and mechanisms across departments 7.2. Evidence of communication among different areas of IOM related to AAP	KII FGD KII FGD Survey	IOM Staff IOM Staff	Content Analysis Descriptive Statistics
	EQ8: Does IOM effectively align its AAP interventions with United Nations and IASC AAP related guidance and mechanisms at global, regional, and national levels?	8.1. Evidence of alignment between the IOM AAP Framework and IASC AAP related guidance and work at different levels 8.2. Evidence of alignment between IOM AAP interventions with UN coordination mechanisms	KII FGD Survey	IOM Staff, global and local partners IOM Staff and local partners	
	EQ9: Are IOM AAP principles, mechanism and framework encouraging and reinforcing international and local partnerships for a comprehensive response tailored to the needs of affected populations?	9.1. Evidence of partnerships built around the theme of AAP at a global, regional, and local level 9.2. Evidence of use of AAP tools and frameworks for promoting a			

		people centered approach within and outside IOM			
	EQ10: What systems are in place to collect and integrate the views of affected populations in IOM's work?	10.1. Evidence of Complaints and Feedback Mechanisms and participatory Implementation across program areas 10.2. Evidence of program changes due to views of affected populations			
	EQ11: Have IOM AAP Framework initiatives been effective to foster coordination with local and international partners for a better response, tailored to the identified needs of the affected populations?	11.1. Evidence of partnerships built around AAP using IOM's tools 11.2. Evidence of joint program change due to feedback from affected populations			
Effectiveness	EQ12: Are IOM's approaches and interventions adapting and responding effectively and timely to different aspects and rising needs of AAP?	12.1. Evidence of IOM AAP approaches and Interventions adapting to changing context (e.g., COVID, humanitarian crisis) 12.2. Evidence of IOM's approaches and tools update over time	Desk Review KIIs FGD	IOM Staff AAP Framework and tools over time IOM Staff	Content Analysis Descriptive Statistics
	EQ13: Has IOM's decision making been effective in leading, coordinating and delivering institutional AAP approach, to make the best use of IOM's strengths and areas of expertise?	13.1. Evidence of senior leadership engagement in AAP work throughout IOM 13.2. Evidence of AAP practices being tailored to the specific context of IOM	KIIs Survey FGD	IOM Staff and local partners Affected Populations	Content Analysis Descriptive Statistics
	EQ14: To what extent have IOM's AAP instruments, feedback mechanisms and broader community-based initiatives been effective to support the implementation of AAP principles and commitments for the most vulnerable and to ensure that no one is left behind?	14.1. Evidence of Increased Inclusion of affected populations in IOM's project cycle 14.2. Level of progress reported by member states in annual AAP reporting	KII Survey FGD		

	EQ15: Have IOM's communication tools been effective to raise internal and external awareness on AAP and to properly integrate the views of affected populations?	15.1 Evidence of Increased awareness and knowledge of staff on IOM AAP work and mechanisms 15.2. Evidence of programme adaptation due to feedback received by affected populations	KII Survey FGD	IOM Staff Affected Populations	
	EQ16: Are there systems in place to document and measure IOM's global and programmatic performance of the inclusion of AAP principles and commitments in its activities and to record lessons learned and factors affecting IOM's performance?	16.1. Evidence of regular monitoring of IOM AAP initiatives and performance and identification of lessons learned 16.2. Evidence of data collected on AAP initiatives being used for improving program design and implementation	FGD KII	IOM Staff Affected Populations	
Efficiency	EQ17: Are IOM's resource allocations appropriate to support IOM institutionalization and operationalization of AAP approach and related evolving international requirements? Are the specific resources allocated to AAP managed efficiently?	17.1. Adequacy of resources allocated to AAP In relation to IOM's mandate in the area 17.2. Evidence of proper management of resources allocated to IOM for AAP Initiatives	Desk Review KII Survey FGD	IOM Staff	Content Analysis Descriptive Statistics
	EQ18: Are the systems in place to support IOM offices in fundraising for AAP interventions efficient, adaptive, and cost-effective?	18.1. Evidence of Increased funding allocated to AAP at a regional and local level 18.2. Evidence of appropriate technical support provided by IOM Headquarters to local and regional offices in fundraising	Desk Review KII Survey FGD	IOM Staff	
	EQ19: Does IOM's participation in the United Nations and IASC mechanisms facilitate access to funding and resource mobilization related to AAP?	19.1. Evidence of new projects designed in the context of engagement with IASC In AAP 19.2. Evidence of Increased visibility gained by IOM In the context of IASC's work in AAP	Desk Review KII Survey FGD	Annual AAP Reports IOM Staff	

	EQ20: Is IOM efficient in supporting and enhancing staff expertise and development in the field of AAP?	20.1. Number of trainings provided by IOM over time 20.2. Quality of training on AAP as assessed by participants and other stakeholders	FGD		
Impact	EQ21: How is IOM's impact in the field of AAP perceived by IOM Member States, donors, United Nations partners and affected populations, including beneficiaries?	21.1. Level of Impact of IOM's AAP operations as assessed by Institutional partners 22.2. Level of Impact of IOM's AAP operations as assessed by affected populations	Desk Review KIIs FGD Survey	IOM Staff Partners Affected Populations	Content Analysis Descriptive Statistics
	EQ22: Did IOM's investments in AAP institutionalization and programmes lead to immediate and medium-term results and impacts that can be identified at global, regional, and national levels?	22.1. Evidence of impact of IOM AAP initiatives over the well-being of affected population as reported by IOM staff and partners 22.2. Evidence of impact of IOM AAP initiatives over the well-being of affected population as reported by affected populations 22.3. Evidence of Increased empowerment of affected population leading to community owned Initiatives and non-expected results	Desk Review KIIs FGD Survey KII FGD	IOM Staff Partners Affected Populations	Content Analysis Descriptive Statistics
	EQ23: Did IOM's programmes and projects have an impact on the representation and meaningful participation of particularly vulnerable population groups (i.e., women, girls, persons with disabilities) in decision making processes?	23.1. Evidence of Increased participation of vulnerable groups in project cycle due to IOM AAP interventions	KIIs FGD Survey	IOM Staff	Content Analysis Descriptive Statistics
Sustainability	EQ24: What systems are in place to address and guarantee the sustainability of IOM's application of AAP principles and commitments in its interventions?	24.1. Evidence of sustainable funding to IOM AAP initiatives over time	KIIs FGD Survey	IOM Staff DHRR reports	Content Analysis Descriptive Statistics

		24.2. Evidence of Increased awareness and engagement of IOM's staff and leadership over time	KIIs FGD Survey	IOM Staff Partners
	EQ25: Does IOM's engagement with governments, civil society, the United Nations, IASC and affected populations facilitate the sustainability of IOM's support and accountability?	25.1. Evidence of Increased external support to IOM's work on AAP over time		
		25.2. Evidence of increased visibility of IOM's work on AAP	KIIs FGD	IOM Staff
	EQ26: Has IOM's integration of AAP principles in its work helped to generate stable and long-lasting participation and accountability mechanisms for people from affected marginalized groups?	26.1. Evidence of lasting impact of participation in the creation of community owned engagement mechanisms 26.2. Evidence of the creation of participation and accountability mechanisms beyond project interventions that have been incorporated in the institutional framework of IOM at a global, regional, and local level		

ANNEX C. EVALUATION INSTRUMENTS

Key Informant Interviews

Criteria	Questions	IOM staff HQ	IOM staff reg/local	International partners	Local partners
Relevance	To what extent do you find IOM's AAP approach relevant and aligned with the needs and priorities of IOM Member States and United Nations system (IASC commitments in particular), and of the affected populations and beneficiaries IOM assists? - Probe for alignment at global, regional, and national levels.	x	x	x	
	To which extent do you find IOM's AAP specific mechanisms and guidance relevant for IOM offices to enable programming and implementation of AAP in its interventions? - Probe for the use of AAP Framework and tools and their relevance.	x	x		x
	How do you see IOM's AAP approach consider the cross-cutting issues of human rights, gender equality, disability, and environment? - Probe for examples of how these cross-cutting issues inspire actual practice.	x	x		
	To which extent relevant marginalized groups were engaged in the design of the framework or their experiences considered? - Probe for the engagement of relevant marginalized groups in AAP initiatives.	x			
	What is unique about the implementation of AAP by IOM, considering its institutional mandate? What is its comparative advantage? - Probe for concrete examples of lessons learned on AAP in the context of migration initiatives and projects.	x	x	x	x
	How are power differences considered or to be considered in project design and implementation? How does the AAP guidance and tools help with that?	x	x		x

Coherence	<p>What are the mechanisms in place to increase coherence within IOM for the inclusion of AAP principles and commitment in relevant areas of work? Are they working?</p> <ul style="list-style-type: none"> - Probe for communication among the different areas of IOM. 	x	x		x
	<p>Is IOM effectively aligning its AAP interventions with United Nations and IASC AAP related guidance and mechanisms? Please, give examples of alignment or misalignment.</p> <ul style="list-style-type: none"> - Probe for alignment between the IOM AAP framework and IASC AAP related guidance and work at different levels. - Probe for evidence of alignment between IOM AAP interventions and United Nations coordination mechanisms. 				
	<p>Are IOM AAP principles, mechanism and framework helping to establish international and local partnerships for a comprehensive response tailored to the needs of affected populations?</p> <ul style="list-style-type: none"> - Probe for concrete examples of partnerships - Probe for the use of IOM AAP guidance and tools to generate collaboration at a regional and local level. 	x	x	x	x
	<p>What systems are in place to collect and integrate the views of affected populations in IOM's work?</p> <ul style="list-style-type: none"> - Probe for the implementation of CFMs and participatory implementation across programme areas. - Probe for concrete examples of programme changes due to views of affected populations. 				
	<p>Have IOM AAP framework initiatives been able to foster coordination with partners, tailored to the identified needs of the affected populations?</p> <ul style="list-style-type: none"> - Probe for partnerships built around AAP using IOM's tools. - Probe for joint programme change due to feedback from affected populations. 				
Effectiveness	<p>Are IOM's approaches and interventions adapting and responding timely to different aspects and rising needs of AAP and the context?</p> <ul style="list-style-type: none"> - Probe for concrete examples of adaptation and tools updates. 	x	x		x

	Has IOM's decision making process been effective in promoting AAP within the Organization? Is there leadership buy in and responsiveness to AAP?	x	x	x	x
	To which extent do you find IOM has been able to deliver on AAP, considering information, participation, feedback, and complaints mechanisms? - Probe for concrete results.	x	x	x	x
	Has IOM been able to communicate effectively to raise internal and external awareness on AAP and to properly integrate the views of affected populations? - Probe for level of awareness of AAP within IOM. - Probe for evidence of programme adaptation due to feedback received by affected populations.	x	x	x	x
	Are there mechanisms to record progress on IOM's work on AAP and to record lessons learned? - Probe for data being collected and used to impact programming.	x	x	x	x
Efficiency	Do you find IOM's resources appropriate to support IOM's institutionalization and operationalization of AAP approach? Do you think they are managed efficiently? - Probe for concrete examples of efficient or inefficient use of resources.	x	x		x
	Do you think that the systems in place to support IOM offices in fundraising for AAP interventions are working well (being efficient, adaptive, and cost-effective)? - Probe for examples of increased funding allocated to AAP at a regional and local level. - Probe for any technical support provided by Headquarters to local and regional offices in fundraising.	x	x		x
	Do you find IOM's participation in the United Nations and IASC mechanisms facilitate access to funding and resource mobilization related to AAP? - Probe for evidence of new projects designed in the context of engagement with IASC In AAP.	x		x	

	<ul style="list-style-type: none"> - Probe for increase in visibility gained by IOM In the context of IASC's work in AAP. 				
	<p>How do you assess the work of IOM in developing capacity of staff in AAP?</p> <ul style="list-style-type: none"> - Probe for the amount and quality of trainings provided. 	x	x	x	x
Impact	<p>How do you see IOM's impact in the field of AAP?</p> <ul style="list-style-type: none"> - Probe for concrete examples. 	x	x	x	x
	<p>Do you think IOM's investments in AAP institutionalization and programmes have led to concrete results and impacts that can be identified at global, regional, and national levels? Please, give concrete examples.</p> <ul style="list-style-type: none"> - Probe for the impact in the well-being and empowerment of affected populations. 	x	x	x	x
	<p>Do you think IOM's programmes and projects have an impact on the representation and meaningful participation of vulnerable population groups (i.e., women, girls, persons with disabilities) in decision making processes? Please, give concrete examples.</p>	x	x	x	x
Sustainability	<p>What systems are in place to address and guarantee the sustainability of IOM's application of AAP principles and commitments in its interventions?</p> <ul style="list-style-type: none"> - Probe for sustainable funding. - Probe for increased awareness and engagement of IOM's staff and leadership over time. 	x	x		x
	<p>Do you think IOM's engagement with governments, civil society, the United Nations, IASC and affected populations facilitate the sustainability of IOM's support and accountability?</p> <ul style="list-style-type: none"> - Probe for increased external support to IOM's work on AAP over time. - Probe for evidence of visibility of IOM's work on AAP. 	x	X	x	x

	<p>Do you think IOM's integration of AAP principles has helped to generate stable and long-lasting participation and accountability mechanisms for people from affected marginalized groups? Do you think communities have been empowered by AAP?</p> <ul style="list-style-type: none"> - Probe for evidence of lasting Impact of participation in the creation of community owned engagement mechanisms and community empowerment. 	x	x	x	x
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Focus Group Discussions: For External Partners

Brief Introduction

IOM has launched the Accountability to Affected Populations Framework which became a mandatory Instruction 285 (IN/285) in 2021. The AAP Framework lays out five overall commitments: (a) leadership; (b) information-sharing and transparency; (c) participation; (d) complaints and feedback mechanisms; and (e) partner coordination. The AAP team at IOM has been providing technical assistance, trainings, and internal alliances to help implement the framework. This evaluation has the purpose of evaluating IOM's strategy and operations in the field of AAP.

Relevance

- What is unique about the work of IOM and that you think could potentially contribute to the wider humanitarian community in AAP?

Effectiveness/impact

- What is your view on the contribution of IOM to the humanitarian community at a global level (through interagency work and inputs, dialogue, trainings, knowledge etc)?
- Are you familiar with the work of IOM on AAP in the field? Do you have any examples to give of effective experiences IOM has on the ground?
- Are you familiar with any challenges faced by IOM in implementing AAP that you can relate to in your own organization?
- Are you familiar with methods/tools/systems to help measure the impact of AAP?

Lessons learned and recommendations

- What would be your recommendations for helping to expand the work of AAP at IOM?

Focus Group Discussion: For Staff

Relevance

- Do you find IOM's strategy and approach to AAP relevant to your own work? Have you used any tools on AAP provided within the organization?

Effectiveness/impact

- What are the key results you identify from IOM's work on AAP? (in terms of information provided to Affected Populations, participation, complaints and feedback mechanisms and overall community empowerment and engagement)

Efficiency

- What are the main challenges you see in the operation of AAP'S mechanisms? (e.g., Complaints and feedback mechanisms, participation, information etc)?

Lessons learned and recommendations

- What would be the key lessons learned in the work of AAP you have been engaged in and your recommendations for future initiatives to further expand the work of AAP at IOM?

Global Survey

Part I. Identification of Stakeholders

- 1) Please, identify which group of stakeholders you belong to:
 - a) IOM Staff HQ
 - b) IOM Staff at a Regional level
 - c) IOM Staff at a local level
 - d) Other

Part II. Relevance and Coherence

1. Please, assess the work of IOM in Accountability to Affected Populations in the following items (consider 1 as the lowest and 5 as the highest grading):

Question	1	2	3	4	5	I don't know/ Not
Utility of AAP guidance and tools to help with programming at a regional and local level						
Connection to the cross-cutting issues of human rights, gender equality, disability and environment						
Coherence with other guidance, frameworks, and tools within IOM in other areas						
Communication of AAP's framework and tools within IOM						
Utility of IOM's guidance on AAP to establish partnerships and implement joint programmes						

2. In your opinion, what is the comparative advantage of IOM in promoting Accountability to Affected Populations, considering its institutional mandate? What is IOM's unique characteristics in operating AAP that can be helpful to the learning of the wider humanitarian community?
-

Part III. Effectiveness and Impact

3. Please, state to which extent you agree with the following statements about the work of IOM in Accountability to Affected Populations (consider 1 as the lowest and 5 as the highest grading):

Question	1	2	3	4	5	I don't know/ Not applicable
IOM is being able to provide information to Affected Populations						
IOM is promoting participation of Affected Populations						
IOM is being able to implement and manage complaints and feedback mechanisms						
The level of awareness on AAP has increased since 2021 (after the launch of the AAP Framework in IN/285)						
The level of technical knowledge/capacity on AAP has increased since 2021 (after the launch of the AAP Framework in IN/285)						
IOM is being able to use feedback received by Affected Populations to change programme implementation and better assist Affected Populations						
Affected populations have increased their well-being and empowerment						
Vulnerable populations (e.g., women, girls, persons with disabilities) have increased their participation in decision making processes						

4. In your opinion, what have been the greatest achievements of IOM in promoting Accountability to Affected Populations and adhering to related principles in the past 3 years (from 2021 on)?

Part IV. Efficiency

5. Please, rate to which extent you agree with the following statements in relation to IOM's work on Accountability to Affected Populations: (consider 1 as the lowest/worst and 5 as the highest/best grading):

Question	1	2	3	4	5	I don't know/ Not applicable
IOM's resources are appropriate to support institutionalization and operationalization of AAP						
Funding has increased for AAP in the past few years						
Training provided by HQ on AAP has been useful to increase my capacity in the area						
I use the online repository of AAP available for IOM Staff						
The Community of Practice on AAP is a useful resource						

6. Do you have any suggestions on how to improve: a) Headquarters' work in the promotion of AAP (guidance, training, tools, collaboration with other areas etc) and b) Field Missions' work on AAP (e.g. (IT systems for Complain and Feedback Mechanisms, integration of data, mobilization of staff etc)?

Part V. Sustainability

7. How do you assess the following items of IOM's work on AAP: (consider 1 as the lowest/worst and 5 as the highest/best grading):

Question	1	2	3	4	5	I don't know/ Not applicable
Senior leadership support to AAP						
Donor support to AAP						
Participatory mechanisms in place at IOM's field operations (both in emergency and development contexts)						
External partners' support for APP in IOM						
Visibility of IOM's work on AAP for external partners						

8. Please, use this space for any additional comments or suggestions you would have for future implementation of AAP initiatives in IOM.

ANNEX D. AAP-RELATED INDICATORS IN THE IOM STRATEGIC RESULTS FRAMEWORK 2024

Objective	Long term outcome/outputs	Indicators	Division/Unit
1: Saving lives and protecting people on the move.	Short-Term Outcome 1a.1: Crisis-affected populations have their basic needs met and have minimum living conditions with reduced barriers to access for marginalized and vulnerable individuals.	# and percentage of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner (disaggregation by sex and age & type of assistance: shelter & settlement support, MPCA, WASH, healthcare, MHPSS, movement assistance)	HUM OPS/ MHD/ MHPSS/ PXD/ AAP
	Short-Term Outcome 1b.1: Governments and humanitarian actors work with crisis-affected populations to identify and respond to their vulnerabilities and needs.	# and percentage of new or revised programmes based on consultations with crisis-affected population	AAP
	Output 1b.1.2: Crisis-affected populations participate in decision-making for the design, planning, and implementation of humanitarian programming.	# and percentage of crisis-affected persons, including members of community-based committees and all key gender groups, who participated in decision-making for the design, planning, and implementation of humanitarian programming	AAP
		# of humanitarian programmes revised or designed to reflect consultations with the participation of crisis-affected population	AAP
	Output 1b.2.3: Appropriate and safe to access feedback and complaint mechanisms are established.	# and percentage of complaints processed in a timely, efficient, and safe manner	AAP
		# and percentage of projects that implement a complaint and feedback mechanism	AAP
	Short-Term Outcome 1b.3.3: Vulnerable and at-risk persons are protected through their sustained and meaningful participation within humanitarian protection.	# and percentage of beneficiaries who report sustained and meaningful participation in humanitarian protection intervention	HPT/ AAP

		Output 1c.2.3: Humanitarian actors are supported to ensure that Affected Populations and local actors, especially marginalized groups, are fully consulted and can actively participate in humanitarian response.	# of humanitarian actors that have been supported to ensure that affected people and local actors are actively consulted in designing and implementing humanitarian response	AAP
			# and percentage of beneficiaries who report being consulted in the design and implementation humanitarian response	AAP
Objective 3: Facilitating pathways for regular migration.		Short-Term Outcome 3d.4: Vulnerable or marginalized migrants, including unaccompanied children and victims of trafficking, claim their rights and access to protection-related services that prioritize their safety and dignity, participation, and overall empowerment.	# and percentage of beneficiaries reporting that assistance is delivered in a safe, accessible, accountable, and participatory manner	AAP / PXD / MSD
		Output 3d.4.4: Vulnerable or marginalized migrants are consulted and actively involved in shaping the programs and policies impacting them.		
SRF Cross-Cutting Priority Indicators	1: Integrity, Transparency and Accountability		# and percentage of IOM missions engaged in crisis-related programming are integrating AAP in country strategic plans	AAP
			# of IOM missions engaged in country's inter-agency AAP Working Group	AAP
	3: Protection-Centered		percentage of projects integrating AAP operational pillars into their activities	AAP

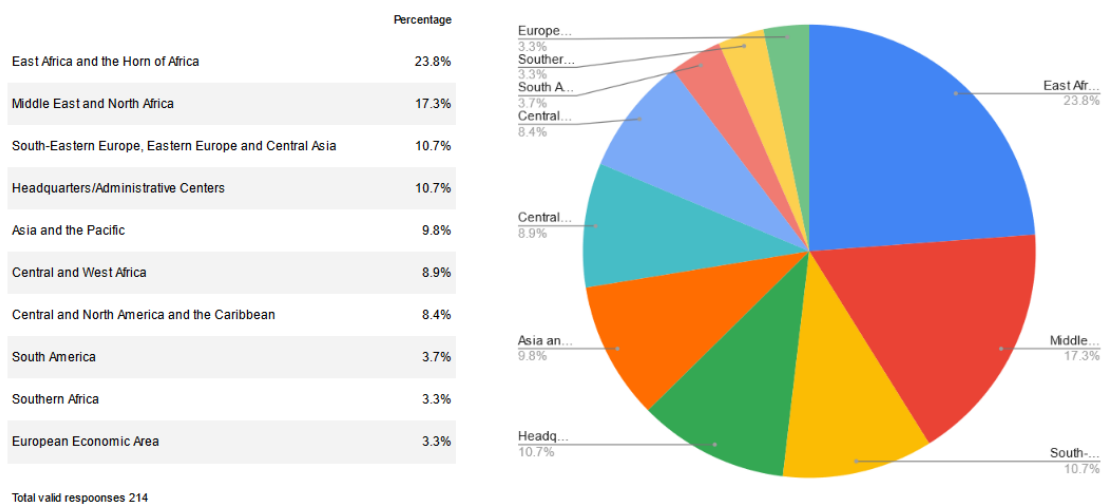
ANNEX E. KEY INFORMANT INTERVIEWS

Gender	Title	Organization
1F	Manager, Community Engagement / Accountability	International Federation of Red Cross and Red Crescent Societies
1F	Senior Investigator	IOM (Headquarters)
1F	AAP Consultant	IOM (Headquarters)
1M	Ukraine Response Coordinator	IOM (Ukraine Country Office)
1M	Camp Coordination and Camp Management (CCCM) Protection Rapid Response Officer	IOM (Headquarters)
1F	Business Analyst	IOM (Headquarters)
1F	Advisor on the Safe and Accountable Programming team	USAID, Bureau for Humanitarian Assistance
1F	Senior AAP Policy and Project Advisor	IOM (Headquarters)
1F	Head of Transition and Recovery Iraq	IOM (Iraq Country Office)
1M	Zite Manager Operations Coordinator	IOM (Headquarters)
1F	Senior Migration Crisis Analysis (Department of Operations and Emergencies/TRD)	IOM (Headquarters)
1F	AAP Consultant	IOM (Headquarters)
1F	Former M&E Officer	IOM (Türkiye Country Office)
1F	Community Engagement Program Coordinator	IOM (Iraq Country Office)
1F	International Migration Law Officer	IOM Headquarters
1F	Business Analyst	IOM (Headquarters)
1F	Deputy Director, Department of Operations and Emergencies	IOM (Headquarters)
1M	Chief of Mission	IOM (Indonesia Country Office)
1F	Oversight Officer USRAP (former M&E Officer, 2018 to 2023)	IOM (Global Office Washington)
1F	Senior Knowledge Manager Coordinator (former Senior Migration Crisis Analyst 2018–2022)	IOM (Headquarters)
1F	Programme Coordinator (PSU)	IOM (Yemen Country Office)
1M	Chief of Mission	IOM (Moldova Country Office)
1M	Deputy Programme Coordinator (ARMP)	IOM (Regional Office Dakar)

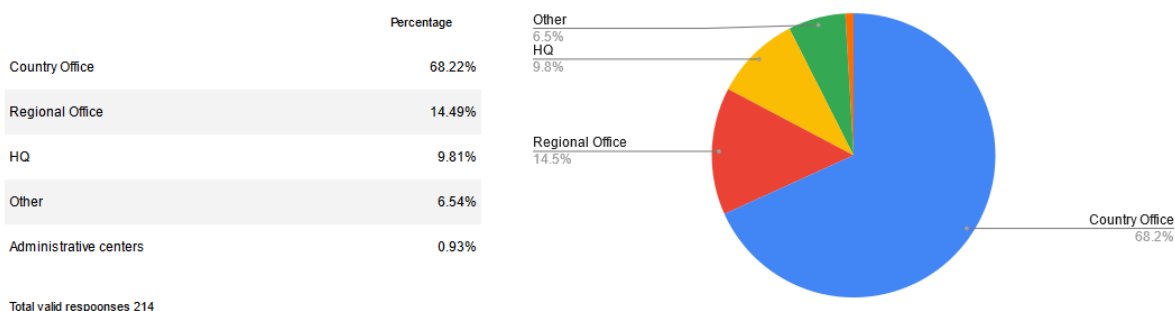
1M	Head of Division for Migration, Environments and Climate Change (former Cox's Bazaar Bangladesh emergency coordinator)	IOM (Headquarters)
1M	AAP Consultant	IOM (Headquarters)
1F	Head of Institutional Capacity Building Unit, Department of Emergencies	IOM (Headquarters)
1M	AAP and Data Officer	IOM (Headquarters)
1M	PRD head and (former Türkiye Whole of Syria head of suboffice during AAP Framework pilot 2018	IOM (Headquarters)
1M	Global DTM Coordinator (2018 to 2023)	IOM (Headquarters)
1F	Protection Officer (Accountability to Affected People), Division of International Protection	UNHCR
1F	Chief of Mission	IOM (Djibouti Country Office)
1F	Gender and PSEA Senior Coordination (2018 to 2020)	IOM (Headquarters)
1M	Senior Regional Migrant Assistance Specialist	IOM (Regional Office Panama)
1F	Advisor on the Safe and Accountable Programming team	USAID, Bureau for Humanitarian Assistance
1F	Chief of Mission (former Department of Operations and Emergencies Deputy Director, 2020–2022)	IOM (Philippines Country Office)
35 (23F 12M)		

ANNEX F. SUMMARY OF ONLINE SURVEY RESULTS

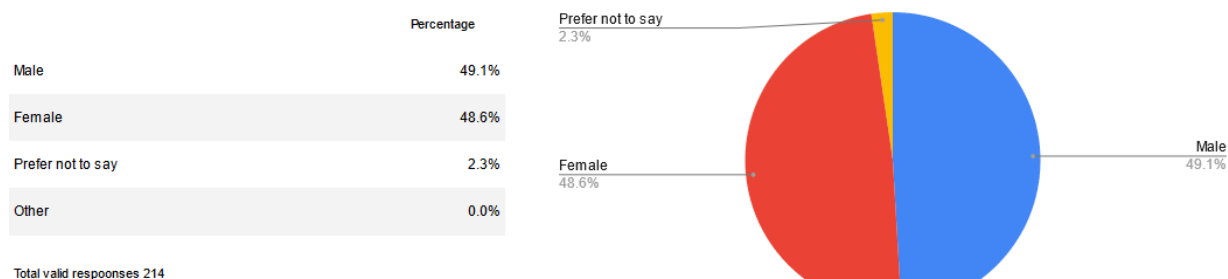
1. In which region are you based?



2. Are you working in?



3. Please indicate your gender



4. Please, assess the work of IOM in AAP in the following items (consider 1 as the lowest and 5 as the highest grading):

	1	2	3	4	5	I don't know / Not applicable **
Utility of AAP guidance and tools to help with programming at a regional and local level	5.3%	11.6%	31.6%	32.1%	19.5%	11.21%
Connection to the cross-cutting issues of human rights, gender equality, disability, and environment	4.6%	16.8%	23.9%	33.0%	21.8%	7.94%
Coherence with other guidance, frameworks and tools within IOM in other areas	2.5%	13.7%	25.4%	39.6%	18.8%	7.94%
Communication of AAP's framework and tools within IOM	10.5%	15.0%	24.5%	33.5%	16.5%	6.54%
Utility of IOM's guidance on AAP to establish partnerships and implement joint programmes	8.0%	16.5%	29.8%	25.0%	20.7%	12.15%

Total valid responses 214

Relative to grading totals

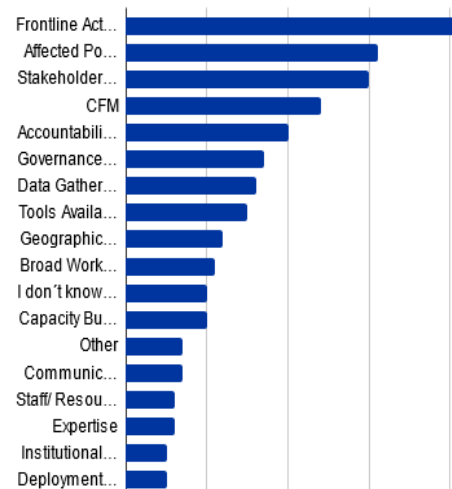
"I don't know /Not applicable" - Relative to response count

5. In your opinion, what are IOM's unique characteristics in operating AAP that can be helpful to the learning of the wider humanitarian Community?

	Categories	Mentions	% of Mentions	% of Responses
1	Frontline Action/ Local Focus	41	15.02%	27.15%
2	Affected Population Integration	31	11.36%	20.53%
3	Stakeholder Coordination	30	10.99%	19.87%
4	CFM	24	8.79%	15.89%
5	Accountability/ Commitment/ Transparency	20	7.33%	13.25%
6	Governance/ Guidelines	17	6.23%	11.26%
7	Data Gathering/ Knowledge Management	16	5.86%	10.60%
8	Tools Availability	15	5.49%	9.93%
9	Geographical Reach	12	4.40%	7.95%
10	Broad Work Scope	11	4.03%	7.28%

< > 1 2

Total valid responses 151



6. Please, state to which extent you agree with the following statements about IOM's performance in the operationalization of the AAP commitments. (consider 1 as the lowest and 5 as the highest grading):

	1	2	3	4	5	I don't know / Not applicable **
IOM is being able to provide information to Affected Populations	2.4%	10.6%	27.5%	30.4%	29.0%	3.27%
IOM is promoting participation of Affected Populations	4.4%	11.7%	19.0%	36.6%	28.3%	4.21%
IOM is being able to implement and manage complaints and feedback mechanisms	4.8%	15.9%	30.0%	22.7%	26.6%	3.27%
The level of awareness on AAP has increased since 2021 (after the launch of the AAP Framework in IN/285)	3.2%	11.6%	25.4%	30.7%	29.1%	11.68%
The level of technical knowledge/capacity on AAP has increased since 2021 (after the launch of the AAP Framework in IN/285)	5.8%	12.2%	27.0%	27.5%	27.5%	11.68%
IOM is being able to use feedback received by Affected Populations to change programme implementation and better assist Affected Populations	6.5%	18.4%	32.3%	24.9%	17.9%	6.07%
Affected populations have increased their well-being and empowerment	4.9%	17.0%	29.7%	32.4%	15.9%	14.95%
Vulnerable populations (e.g. women, girls, persons with disabilities) have increased their participation in decision making processes	7.2%	15.6%	35.6%	27.2%	14.4%	15.89%
IOM is being able to provide relevant information on Affected Populations to other humanitarian stakeholders	5.2%	13.5%	22.3%	34.2%	24.9%	9.81%

Total valid responses 214

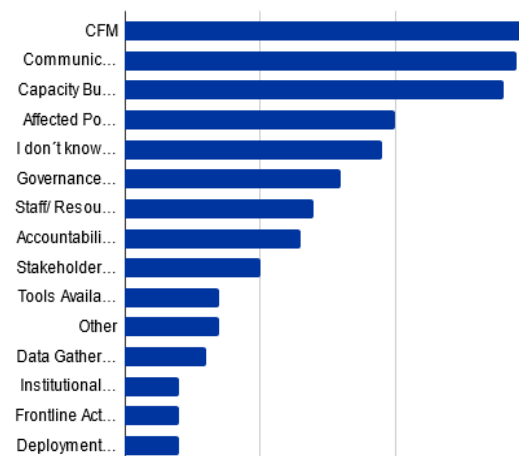
Relative to grading totals

"I don't know / Not applicable" - Relative to response count

7. In your opinion, what have been the greatest achievements of IOM in promoting Accountability to Affected Populations and adhering to related principles in the past 3 years (from 2021 on)? Please explain your answer.

	Categories	Mentions	% of Mentions	% of Responses
1	CFM	30	14.22%	21.13%
2	Communication/ Awareness	29	13.74%	20.42%
3	Capacity Building/ Training/ Information Sharing	28	13.27%	19.72%
4	Affected Population Integration	20	9.48%	14.08%
5	I don't know/Not applicable	19	9.00%	13.38%
6	Governance/ Guidelines	16	7.58%	11.27%
7	Staff/ Resource Appropriation/ Funding	14	6.64%	9.86%
8	Accountability/ Commitment/ Transparency	13	6.16%	9.15%
9	Stakeholder Coordination	10	4.74%	7.04%
10	Tools Availability	7	3.32%	4.93%

Total valid responses 142



8. Please, rate to which extent you agree with the following statements in relation to IOM's investments to support the work on Accountability to Affected Populations: (consider 1 as the lowest/worst and 5 as the highest/best grading):

	1	2	3	4	5	I don't know / Not applicable **
IOM's resources are appropriate to support institutionalization and operationalization of AAP	13.8%	17.4%	28.2%	26.2%	14.4%	8.02%
Funding has increased for AAP in the past few years	10.1%	17.7%	32.9%	25.9%	13.3%	25.47%
Training provided by HQ on AAP has been useful to increase my capacity in the area	12.6%	16.0%	22.9%	26.9%	21.7%	17.06%
I use the online repository of AAP available for IOM Staff	18.2%	16.6%	20.9%	25.7%	18.7%	11.79%
The Community of Practice on AAP is an useful resource	8.4%	10.8%	27.7%	31.3%	21.7%	20.57%

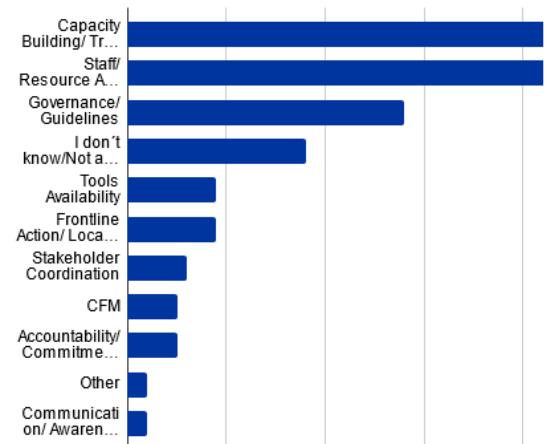
Total valid responses varying from 209 to 212 between statements
Relative to grading totals
"I don't know /Not applicable" - Relative to response count

9. Do you have any suggestions on how to improve: a) Headquarters' capacity Building efforts and allocation of resources in the promotion of AAP (guidance, training, tools, collaboration with other areas etc) and b) Field Missions' capacity to implement activities related to AAP (e.g. (IT systems for Complain and Feedback Mechanisms, integration of data, mobilization of staff etc)? Please, explain your answer.

	Categories	Mentions	% of Mentions	% of Responses
1	Capacity Building/ Training/ Information Sharing	67	33.67%	50.38%
2	Staff/ Resource Appropriation/ Funding	48	24.12%	36.09%
3	Governance/ Guidelines	28	14.07%	21.05%
4	I don't know/Not applicable	18	9.05%	13.53%
5	Tools Availability	9	4.52%	6.77%
6	Frontline Action/ Local Focus	9	4.52%	6.77%
7	Stakeholder Coordination	6	3.02%	4.51%
8	CFM	5	2.51%	3.76%
9	Accountability/ Commitment/ Transparency	5	2.51%	3.76%
10	Other	2	1.01%	1.50%

< > 1 2

Total valid responses 142



10. How do you rate the following actions to guarantee sustainability of IOM's work on AAP after closure of programmes: (consider 1 as the lowest/worst and 5 as the highest/best grading):

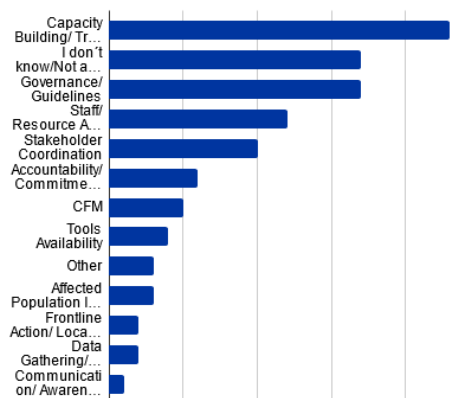
	1	2	3	4	5	I don't know / Not applicable **
Donor support to AAP	5.0%	11.2%	25.1%	29.1%	29.6%	15.96%
Participatory mechanisms in place at IOM's field operations (both in emergency and development contexts)	4.2%	9.5%	25.3%	30.5%	30.5%	10.38%
External partners' support for AAP in IOM	5.2%	11.6%	33.1%	32.6%	17.4%	18.48%
Set up of affected population committees that can guarantee sustainability of AAP	5.9%	11.9%	26.5%	25.9%	29.7%	12.74%

Total valid responses varying from 209 to 212 between statements
Relative to grading totals
"I don't know /Not applicable" - Relative to response count

11. Please, use this space for any additional comments or suggestions you would have for future implementation of AAP initiatives in IOM. Please explain your answer.

	Categories	Mentions	% of Mentions	% of Responses
1	Capacity Building/ Training/ Information Sharing	23	21.90%	25.84%
2	I don't know/Not applicable	17	16.19%	19.10%
3	Governance/ Guidelines	17	16.19%	19.10%
4	Staff/ Resource Appropriation/ Funding	12	11.43%	13.48%
5	Stakeholder Coordination	10	9.52%	11.24%
6	Accountability/ Commitment/ Transparency	6	5.71%	6.74%
7	CFM	5	4.76%	5.62%
8	Tools Availability	4	3.81%	4.49%
9	Other	3	2.86%	3.37%
10	Affected Population Integration	3	2.86%	3.37%

Total valid responses 142



ANNEX G. TERMS OF REFERENCE

EVALUATION OF IOM'S ACCOUNTABILITY TO AFFECTED POPULATIONS

TERMS OF REFERENCE

Commissioned and managed by: IOM Central Evaluation Unit (EVA) – Department of Strategic Planning and Organizational Performance (DPP)

EVALUATION CONTEXT

Accountability to affected populations (AAP), initially referred to as “accountability to beneficiaries”, considers affected populations as partners rather than passive recipients of an assistance, aiming to remove the power disparity between aid providers and the communities they serve, for the purpose of ensuring the rights and dignity of the affected populations and preventing the abuse of power and sexual exploitation. Since the early 1990s, international humanitarian actors have been strengthening the accountability to affected populations by investing in the development and implementation of principles, norms, policies, guidance, and training. The [Humanitarian Reform](#) that followed the [2005 Humanitarian Response Review](#), and later the Inter-Agency Standing Committee (IASC) Transformative Agenda (2011), placed a strong focus on accountability to and protection of affected populations, including refugees, migrants and internally displaced.

In 2012, the IASC Principals endorsed 5 commitments¹ on AAP and collectively agreed to apply these principles in their organizations, and to promote them in clusters and with partners. The [revised version](#) of commitments has been endorsed by IASC Principals in 2017² to reflect developments such as the [Core Humanitarian Standard](#), the work done by the IASC on Inter-Agency community-based complaints mechanism, including protection against sexual exploitation and abuse (PSEA), and the importance of fostering meaningful collaboration with local stakeholders. These developments resulted in a range of collective and individual institutional commitments to include people receiving aid in making the decisions that affect their lives and provision of PSEA, which came out as priority recommendations from the [World Humanitarian Summit \(2016\)](#) (WHS) and the [Grand Bargain \(2016\)](#).

Commitments emanating from the 2016 WHS highlighted actions for furthering accountability to people affected by crises, safeguarding humanity, empowering women as change agents and leaders, protecting civilians, and increasing efforts by the international community to support effective policies and frameworks that reduce new and protracted situations of international and internal displacements in a safe and dignified manner. The UN High-Level Summit for Refugees and Migrants in 2016 resulted in the New York Declaration for Refugees and Migrants, which paved the way for the adoption of two global

¹ Leadership/governance; transparency; feedback and complaints; participation; and design, monitoring, and evaluation.

² Leadership; participation and partnership; information, feedback, and action; and results.

compacts in 2018: [the global compact on refugees](#) and the [global compact for safe, orderly and regular migration](#) (GCM). Accountability, respect, and fulfilment of the rights of migrants and internally displaced persons (IDPs), including protection, are also reflected in the [Agenda on Internal Displacement](#) and the Organization's [Strategic Vision](#).

Saving lives, assisting, protecting, and working closely with all vulnerable groups and mobile populations affected by crisis are at the core of International Organization for Migration (IOM) operations. Responsive programming and project implementation in IOM require engaging affected populations in processes and decision-making early on, from needs assessments that aim to correctly identify their needs and contextual suitability including within communities, to program implementation and sustainable completion. The [AAP Framework 2020](#)³ establishes IOM's common approach and commitments for implementing and mainstreaming AAP and is mandatory throughout its crisis-related work as contained in its Migration Crisis Operational Framework 2012 and its [Addendum](#) of 2021. The framework was developed in line with the IASC commitments to AAP and adapted to meet IOM's operational realities. The management of AAP in IOM is mainly the responsibility of the Department of Humanitarian Response and Recovery (DHRR), which works closely with other IOM entities for mainstreaming it, such as the Prevention of Sexual Exploitation and Abuse and Sexual Harassment Unit (PSEAH).

IOM collaborates with Office for the Coordination of Humanitarian Affairs (OCHA), United Nations High Commissioner for Refugees (UNHCR), International Federation of Red Cross (IFRC), World Food Programme (WFP), United Nations International Children's Emergency Fund (UNICEF), and non-governmental actors in the domain of AAP and coordinates its work and contribution via IASC timebound Task Forces (TFs), responsible for delivering the Operational Policy and Advocacy Group (OPAG)-endorsed normative work for the [2022-2023](#).

EVALUATION OBJECTIVE AND SCOPE

Since AAP is high on the IASC and IOM's agendas, IOM's Central Evaluation Unit (EVA) considered strategically relevant to perform a comprehensive assessment of IOM's work and performance in this area and included it in its Biennial Evaluation Plan 2023-2024. The overall objective is **to evaluate IOM's strategic, institutional, and operational approach to AAP, and to provide recommendations and lessons learned on how to further streamline, raise awareness on and advocate for AAP principles and commitments for the populations and communities IOM serves.**

More specifically, the evaluation will examine IOM's global engagement with AAP in crisis-related and non-crisis settings, including its policies, strategies, and programmatic approaches set-up since 2016 (which corresponds to the issuance of new IASC policies, WHS and New York Declaration), to take stock of internal and external synergies, adaptations and institutional steps adopted by IOM for an effective and sustained approach to AAP. It will identify good practices and areas of improvement regarding IOM's decision-making, policymaking, technical guidance, and programme implementation for a comprehensive and collaborative AAP approach, as well as for external coherence with UN agencies, organizations, and governments. The 2019 Multilateral Organization Performance Assessment Network ([MOPAN](#)) [review of IOM](#) noted improvements in AAP with the development of the framework, but highlighted that some key

³ IOM's Accountability to Affected Populations Framework outlines IOM's principles and commitments to affected populations through leadership, information-sharing and transparency, participation, complaints and feedback mechanisms and partner coordination.

areas of work (for instance integrated health-related issues) are not well covered, and the application of AAP standards is variable. The evaluation will also examine the status of the implementation of MOPAN recommendations related to AAP and IASC commitments.

The evaluation will include a field-based analysis of IOM's contribution to regional and national initiatives and community-based approaches on AAP, and of activities implemented as part of IASC task force and other groups. It will also facilitate the identification of IOM's comparative advantage in system-wide strategic approaches and responses, and how sustainability can be further enhanced.

The evaluation will triangulate evidence and select samples of programs that can properly illustrate IOM's contribution to the collective commitment on AAP, to be used as case studies. The evaluation exercise will not focus on the performance of individual programs per se.

The evaluation will also propose a Theory of Change (ToC) to illustrate the expected changes that the AAP Framework will bring to IOM's global commitment in this area.

The target audience for this evaluation is IOM management, IOM staff involved in institutional and operational implementation of AAP approach at HQ and field levels, as well as interested donors, Member States, and international and local partners.

EVALUATION CRITERIA AND QUESTIONS

The evaluation will utilize the standard [OECD/DAC criteria](#)⁴ and integrate an analysis of IOM cross cutting themes of gender, disability, environment and human rights-based approaches in the strategic papers and guidance related to AAP⁵. The evaluation will address the following main questions:

Relevance:

To what extent is IOM's AAP approach relevant and aligned with the needs and priorities of IOM Member States and UN System (IASC commitments in particular), and of the affected populations and beneficiaries IOM assist?

Are IOM's AAP mechanisms and guidance relevant for IOM offices to enable programming and implementation of AAP in its interventions?

How does IOM's AAP approach consider IOM cross-cutting issues of human rights, gender equality, disability and environment?

To what extent were 'relevant marginalized groups' defined/identified by rights-holders themselves?

Are there institutional comparative advantages for AAP approach, which can be identified in the Organization's mandate, to support further advancement in the fields of AAP?

What mechanisms are in place to guarantee that the design and implementation of IOM interventions address power dynamics between affected populations and local and international entities?

⁴ Relevance, coherence, effectiveness, efficiency, impact, and sustainability.

⁵ For further references: [IOM M&E Guidelines](#) - Chapter 5, Annex 5.3, Incorporating cross-cutting themes at IOM.

Coherence:

Which mechanisms are in place to guarantee internal coherence for the inclusion of AAP principles and commitment in relevant IOM areas of work?

Does IOM effectively align its AAP interventions with UN and IASC AAP related guidance and mechanisms at global, regional, and national levels?

Are IOM AAP principles, mechanism and framework encouraging and reinforcing international and local partnerships for a comprehensive response tailored to the needs of affected populations?

What systems are in place to collect and integrate the views of affected populations in IOM's work?

Have IOM's AAP framework initiatives been effective to foster coordination with local and international partners for a better response, tailored to the identified needs of the affected populations?

Effectiveness:

Are IOM's approaches and interventions adapting and responding effectively and timely to different aspects and rising needs of AAP?

Has IOM's decision making been effective in leading, coordinating and delivering institutional AAP approach, to make the best use of IOM's strengths and areas of expertise?

To what extent have IOM's AAP instruments, feedback mechanisms and broader community-based initiatives been effective to support the implementation of AAP principles and commitments for the most vulnerable and to ensure that no one is left behind?

Have IOM's communication tools been effective to raise internal and external awareness on AAP and to properly integrate the views of affected populations?

Are there systems in place to document and measure IOM's global and programmatic performance of the inclusion of AAP principles and commitments in its activities and to record lessons learned and factors affecting IOM's performance?

Efficiency:

Are IOM's resource allocations appropriate to support IOM institutionalization and operationalization of AAP approach and related evolving international requirements? *Are the specific resources allocated to AAP managed efficiently?*

Are the systems in place to support IOM offices in fundraising for AAP interventions efficient, adaptive, and cost-effective?

Does IOM's participation in the UN and IASC mechanisms facilitate access to funding and resource mobilization related to AAP?

Is IOM efficient in supporting and enhancing staff expertise and development in the field of AAP?

Impact

How is IOM's impact in the field of AAP perceived by IOM Member States, donors, UN partners and affected populations, including beneficiaries?

Did IOM's investments in AAP institutionalization and programs lead to immediate and medium-term results and impacts that can be identified at global, regional, and national levels?

Did IOM's programs and projects have an impact on the representation and meaningful participation of particularly vulnerable population groups (i.e., women, girls, persons with disabilities) in decision-making processes?

Sustainability

What systems are in place to address and guarantee the sustainability of IOM's application of AAP principles and commitments in its interventions?

Does IOM's engagement with governments, civil society, the UN, IASC and affected populations facilitate the sustainability of IOM's support and accountability?

Has IOM's integration of AAP principles in its work helped to generate stable and long-lasting participation and accountability mechanisms for people from affected marginalized groups?

METHODOLOGY, ROLES, AND TIMEFRAME

The evaluation will be conducted by an external consultant(s) under the guidance and responsibility of EVA. The main counterpart for the evaluation is DHRRE/AAP, which will provide support during the conduct of evaluation and appoint members to the reference group (RG) for the evaluation. EVA and DHRR will discuss during the inception phase the opportunity of inviting other units/divisions to be part of the RG. The RG will meet regularly (at the inception stage and during the conduct of the exercise), share relevant documentation with the consultant(s), and identify internal and external structures, processes, policies, strategies, and programmatic approaches relevant for the successful conduct of the evaluation. The RG will provide feedback on the evaluation deliverables, i.e., the terms of reference, the inception report, and the draft evaluation report. In consultation with EVA, the RG will propose lists of key informants to be interviewed inside and outside of IOM, and of survey(s)' participants, which will then be finalized in coordination with the consultant(s).

The methodology will apply mixed methods, including but not limited to documentation review, structured and semi-structured interviews, electronic surveys, selected case studies, evidence mapping, and synthesis of IOM and other UN agency evaluations and research. The document review should provide insights into the level of integration of AAP into IOM's programme design, implementation and decision making, as well as into the strengths and weaknesses of IOM's approach. Furthermore, the evaluation consultant(s) will analyze evaluations, reviews and studies related to AAP from other international organizations, including assessments covering IASC commitments, to make some comparative analysis of AAP integration in IOM.

The interviews will be carried out both in person and remotely (by phone, MS Teams, electronically via email or through similar means). If the recruited consultant(s) is(are) based in Geneva, face-to-face interviews may be considered with HQ staff. Interviewees' input will be fully confidential. EVA will discuss the conduct of electronic surveys with RG and finalize the survey

material. Two different surveys may be developed to cover the data collection needs, one internal focusing on IOM and the other on external partners. EVA and RG will examine the possibility to conduct surveys with selected populations, for instance through the case studies, and identify sources that can document the views of affected populations (IOM needs assessments, as well as satisfaction and household surveys for instance).

EVA and the RG will also discuss sampling of initiatives, programs, research, evaluations, and other relevant documents that can be used as case studies or illustration of IOM's work related to AAP, to be

finalized during the inception phase in consultation with the consultant(s). They may include three to five programs based on the geographical and financial criteria. Field visits covering case studies may be organized, to be decided during the inception phase. The methodology will be further refined in the inception report.

The use of various data collection tools (documentation review, interviews, mapping, evidence assessment and surveys) will facilitate triangulation of information collected, thereby increasing the reliability of the findings, lessons learned, good practices and recommendations that will be presented in the evaluation report. A draft evaluation report will be sent to the RG for comments after having been cleared by EVA.

The evaluation is expected to start in September 2023 and a final report should be made available in February 2024 at the latest. EVA will cover the costs for the recruitment of the external consultant(s) and will be responsible for the overall implementation and management of the exercise. Participatory workshop may be organized to discuss preliminary findings, lessons learned and recommendations prior to the finalization of the evaluation report.

ETHICS, NORMS AND STANDARDS

IOM abides by the [Norms and Standards](#) of the UN Evaluation Group (UNEG) and expects all evaluation stakeholders to be familiar with the [Ethical guidelines for evaluation](#) of UNEG and the consultant(s) with the [UNEG code of conduct for evaluation in the UN System](#) as well. UNEG and EVA policy and technical references are available under IOM [Evaluation Webpage](#).

EVALUATION DELIVERABLES AND TIME SCHEDULE

The consultant(s) is(are) expected to provide the following deliverables:

Inception report outlining data collection processes and analysis and including an evaluation matrix with further refinement of evaluation questions, methodology and draft theory of change.

Draft and final evaluation reports of no more than 50 pages (excluding annexes).

Evaluation brief and draft management response (templates provided by IOM).

An indicative work plan for the conduct of the evaluation can be found below, to take place between September 2023 and February 2024.

Below is an indicative work plan for the evaluation:

Activity	Timeframe/ deadlines	Indicative Working Days for consultancy	Who is responsible
Inception phase (including report and kick-off meeting)	End of September, beginning of October 2023	5 days	Consultant(s)
Review of the inception report	October 2023		EVA, RG
Documentation review, surveys, interviews, field visits	October to December 2023	35 days (between 5 and 10 days for field visits if any)	Consultant(s)
Evaluation draft report	January 2024	10 days	Consultant(s)
TOTAL DAYS		55	

CONSULTANT(S) QUALIFICATIONS

At least 15 years of evaluation experience with UN agencies and programs (preferably IOM) or 10 years of evaluation experience and an advanced degree in social and political sciences or related fields.

Thematic knowledge and experience with at least five evaluations in one of the following fields: emergency and humanitarian affairs, accountability to affected populations, as well as with migration and/or displacement related evaluations.

Advanced knowledge and skills in categorization, mapping, mixed methods, and evidence synthesis.

High proficiency in English, with knowledge of French and Spanish languages considered as asset.

SUBMISSION OF APPLICATION

IOM is looking for proposals from service providers to deliver the outlined products. Service providers are requested to submit the following:

A proposal with description of the approach, methodology, activities, work plan, deliverables and consultant(s) experience and expertise matching the ToR.

Two examples of similar work.

Three references.

The budget in USD should include a detailed breakdown of costs per activity, personnel costs, and any other costs relating to the implementation of the tasks outlined in the ToR.

An indicative cost can be included for potential travel to case study countries and Geneva for presenting the findings.

Contract period: September 2023 to February 2024. Potential conflicts of interest should be declared.

Only shortlisted candidates will be notified. IOM reserves the right not to accept any tenders submitted.

Proposals must be submitted via email sent on or before midnight **22 September 2023 (Geneva time)** to eva@iom.int.

Should you need any additional information, please send your queries in writing to eva@iom.int.

For individual consultants interested to apply, please contact eva@iom.int before the deadline for instructions on the application

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