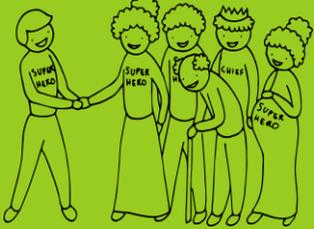
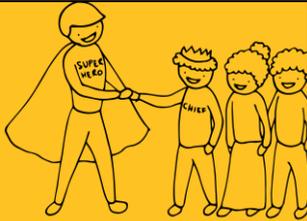


ACTIVE CITIZENS AAP SCORECARD: Approach and Instructions

1. The ACTIVE CITIZENS AAP Scorecard comprises **20 AAP Standards** (Column 1), which are aligned to the Nine Commitments in the Core Humanitarian Standard¹.
2. The next four Columns start from Score 3 (Green) - the highest score. Score 3 equates to ACTIVE CITIZENS; men and women feel aware, involved, consulted, and actively engaged and represented in the intervention; they have the power to determine distribution processes. Communities feel the agency is systematically listening and learning from them through systematic monitoring (see point 3 below), and crucially *is taking action on the information by adjusting interventions and engagement* as needed. The scores move downwards in the next three columns towards Score 0 (Red). A Score 0 is equivalent to PASSIVE RECIPIENTS of aid where people have no power to determine the response. Note: in some contexts, and with a far heavier investment of resources (staff, time, skills, logistics), a theoretical 'Score 4' maybe possible, where communities lead a response, are fully participating, and the most vulnerable and marginalized people are equally included. A Score 4 is not included here as recognition that this Scorecard needs to be grounded in the reality of Humanitarian and Protracted Emergencies.
3. The last Column (right) is space for teams to note down the score achieved in their planning, implementation or monitoring: 1. As measured by themselves, and 2. As measured by Communities. Teams can note the challenges and blockages to achieving each specific AAP Standard. Teams can also note down solutions and next steps. The ACTIVE CITIZEN AAP Scorecard should be used in conjunction with the Tool 3. Rapid Monitoring Checklist (SOPs), and Tool 4. Constituent Voice Questions to Communities and Field Staff to help test the validity, process, and provide evidence for meeting the AAP standards.
4. Correlating to the AAP Scores are different *strengths of community engagement* or Communications With Communities (CWC) activities or strategies. If engagement strategies are not designed or have minimal resources earmarked for them, this will lead to treatment of people as Passive Recipients (Score 0 in Red). If you have moved beyond a 'Agency-Centered' engagement plan (comprising one-way messaging from the agency to community leaders), towards a Community-Centered Intervention and engagement plan – you are more likely to get a Score 3 (Green).
5. The Active Citizen AAP Scorecard is primarily a self-assessment design and implementation tool to help you measure where you are along key AAP standards. The tool is designed to help you to think of creative solutions in complex environments to move up the scale over the life of a program. Therefore it can be used for *every intervention*. Where this is not possible it is important for your agency to systematize or regularize its use (given time, resources and other limitations).
6. The Active Citizen AAP Scorecard uses the generic term '*community*'. This is shorthand for ease of use of this Scorecard. 'Community' needs to be inclusive of a wide representation of people in an intervention. Equitable Representation must include: Men, Women, Elderly, Youth, Disabled, Ethnic minorities, the most Economically and/or Politically Marginalised people, Boys and Girls. In practice this is challenging with, for example, women only discussions monitored by community leaders. Ensuring that community gatekeepers are managed and allow fair representation needs to be carefully considered. *Protection issues may arise and advice should be sought*.
7. Score 3 may *not be achievable* for some agencies (remote locations, nomadic populations, access etc.). Agencies can note why this is the case, and state that you have thought about how to shift processes towards higher scores in future interventions (e.g., more localized staff / language skills, more time on the ground, more communications channels, better understanding of local political economy etc.). *A focus on continued improvement in Scores over time is therefore more important than absolute Scores.*
8. Each agency should think about the best practice timeframe to complete each standard (X number of days before an intervention people should have timely, accurate relevant information); this may vary on context and is not specified here.
9. *The key instruction to use this Scorecard is to be honest as an agency*. This scorecard is NOT A TEST, nor a judgment. *This Scorecard is a tool to help you* as an agency to think about what is needed (e.g., more resources, better access, action plans) to move up the scale to reach better practice AAP standards. In the first few weeks your Score maybe 0 as measured by the community (you may think you are a higher score). *You need to ask yourself and the community what is needed to move to a higher score.*

¹ <https://corehumanitarianstandard.org> The CHS on Quality and Accountability has Nine Commitments. The CHS also has a (lesser-known and very detailed) self-assessment process that requires external support. The Active Citizens AAP Scorecard is distinct from the CHS self-assessment. The Active Citizen Scorecard is designed for more practical and regular use by field staff, at intervention level, rather than at program evaluation level.

ACTIVE CITIZENS SCORECARD

CWC Activities that move from 'Agency-Centred' CWC for Score 0 – towards Community-Centred CWC Strategies for Score 3	Community Centred Engagement & Collective Community/Agency (RE)ACTION	Two-Way Agency Centred Communications (e.g., Q&As)	One-Way Agency Centred Communications	No Communication/ Minimal Engagement	CWC on its own is not enough to shift power and not enough to deliver AAP. CWC can be seen as a key approach to support the delivery of better AAP.
<p>Active CITIZENS AAP Standards</p> <p>...</p> <p>Key Guidelines for Each Intervention</p> <p>Standards always includes Most Vulnerable.</p> <p>*Equitable Representation: Men, Women, Elderly, Youth, Disabled, Ethnic minorities, the most Economically and/or politically marginalised, Boys and Girls.</p>	 <p>ACTIVE CITIZENS Score 3</p> <p>A. Strong consistent AAP strategy fully integrated into interventions with wide and fair community involvement</p> <p>B. Intervention is Community Centred.</p> <p>C. Marginalised people are especially heard, answered <i>and involved</i> throughout.</p> <p>D. AAP quality / intervention is proactively and systematically monitored (by community & field staff) and actioned for better</p>	 <p>OVER ACTIVE AGENCY Score 2</p> <p>A. AAP Activities - not consistently integrated into interventions</p> <p>B. Agency Centred AAP Approaches/ Activities.</p> <p>C. Leaders and Beneficiaries heard and answered – but <i>not involved</i> throughout.</p> <p>D. AAP Quality / intervention not systematically monitored (by community & field staff) or actioned for better impact.</p>	 <p>OVER ACTIVE LEADERS Score 1</p> <p>A. Basic ad hoc AAP and CWC activities and Engagement</p> <p>B. Some one-way agency centred messages</p> <p>C. Leaders are heard and sometimes answered</p> <p>D. Information / intervention not rapidly monitored (by community & field staff) or actioned for better impact.</p>	 <p>Passive Recipients Score 0</p> <p>A. Minimal / No AAP or Engagement</p> <p>B. Limited / No One-Way agency centred messages</p> <p>C. Limited / No space for questions and answers</p> <p>D. Intervention not rapidly monitored (by community & field staff) or actioned for better impact.</p>	<p>Date:</p> <p>Location:</p> <p>We Can Achieve / Have Achieved An Average Score XX</p> <p>Key Challenges/ Blockages:</p> <ol style="list-style-type: none"> XXXX XXXX XXXX <p>Key Actions We Can Take:</p> <ol style="list-style-type: none"> XXXX XXXX XXXX

1. Appropriateness to Current Needs & Vulnerabilities	Score 3	Score 2	Score 1	Score 0	
<p>1.1: Men and Women feel the intervention takes account of their specific current needs and culture (E.g., Regular and systematic needs assessment / sharing assessment information)</p>	<p>Men and women are systematically asked to share information about needs and cultural preferences. We try to adjust the intervention accordingly, and at a minimum explain the challenges to communities.</p>	<p>We sometimes ask men and women about their needs and cultural preferences. We consider adapting our intervention accordingly, but do not always communicate this with the community.</p>	<p>We sometimes ask some people in power (largely men) about their specific needs and cultural preferences. We do not consider changing our intervention accordingly.</p>	<p>We do not ask men and women about specific needs. We assume knowledge of cultural preferences.</p>	<p>SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking A, B, C for the next intervention.</p>
<p>1.2: Men and Women feel their current capacities, vulnerabilities & protection needs are considered (E.g., skills and knowledge to construct their own shelters).</p>	<p>Men and women are systematically asked to share information about capacities. We triangulate information, and try to adjust accordingly. We ensure extra resources, involvement and / or consideration for the most vulnerable.</p>	<p>We sometimes ask some men and women about their capacities with a new assessment. We consider changing our intervention accordingly, but do not always communicate this with the community. We do not systematically reach the most vulnerable.</p>	<p>We sometimes ask some people in power (largely men) about their capacities, and ask them to identify vulnerabilities / protection needs. We do not carry out new needs assessments. We rarely consider changing our intervention accordingly.</p>	<p>We do not ask people about their capacities, and do not identify vulnerabilities or protection needs.</p>	
<p>1.3: Men and women are actively involved in design of selection criteria and deciding names for Entitlement lists, which are then made public, and they are involved in conducting HH needs assessments.</p>	<p>Men and women are active in criteria design, HH selection processes and HH assessments. Information is triangulated and transparent and Entitlement Lists are made public for people to contribute to freely and safely. Process is monitored, verified and & adjusted.</p>	<p>Some groups are involved in criteria design, HH selection and/or HH needs assessments. No transparency of information or triangulation; Entitlement lists are made public sometimes or through limited channels. We do not monitor, verify or adjust.</p>	<p>Some people in power are involved in design of criteria, HH selection process, and/or conducting HH needs assessment. Entitlement Lists are only shared with leaders for information only.</p>	<p>We do not ask people to be involved in design of criteria, HH selection, or conducting HH needs assessment. Entitlement Lists are not made public.</p>	

2. Quality Assistance at Right Time	Score 3	Score 2	Score 1	Score 0	
<p>2.1: Men and Women - including the most vulnerable and most remote - feel a quality intervention reaches them when they need it most.</p>	<p>Men and women are involved in identifying the most vulnerable and most remote. We proactively and systematically ensure services are high quality and reach those in greatest need. We adjust interventions based on community feedback.</p>	<p>We reach some people (including some of the most vulnerable) with what we think is a quality, timely intervention. We do not systematically monitor community perceptions of quality and timeliness.</p>	<p>We reach some people in power with <i>what we think</i> is a quality and timely intervention. We do not monitor quality or timeliness generally, or for the most vulnerable and remote communities.</p>	<p>We do not reach people when they need it most, but we spend budgets on time.</p>	<p>SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking XXX for the next intervention</p>

3. Localise, Resilience & Do No Harm	Score 3	Score 2	Score 1	Score 0	
<p>3.1: Men and women are not negatively affected, are better prepared, more resilient, and less at risk as a result of the intervention.</p>	<p>Men and women systematically share information about the impact of the collective intervention. We listen, learn and adjust together to limit any potential harm and to improve impact. We speak to non-beneficiaries to ensure targeting quality and inclusion.</p>	<p>We ask some men and women about the result of our intervention. We cannot systematically reach the most vulnerable or remote people. We do not always respond to what we hear. We sometimes speak to non-beneficiaries to monitor targeting quality.</p>	<p>We ask some people in power about the result of our intervention. We do not monitor or ask others about results. We do not respond to their feedback. We do not engage affected people but who are not beneficiaries.</p>	<p>We do not ask people about the negative or positive result of our intervention (we assume results are positive and as planned).</p>	<p>SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking XXX for the next intervention</p>
<p>3.2: Local community based organisations (CBOs) and local authorities have increased capacities to cope and respond to</p>	<p>Local CBOs/ Authorities are given support and capacity building to take ownership of key intervention responsibilities. We systematically monitor their preparedness to respond to future disasters,</p>	<p>We hand over some intervention responsibilities to a local CBO/Authority, but do not build their capacity. We do not systematically monitor the impact of their response, and future</p>	<p>We inform local authorities about the intervention, but they are not involved.</p>	<p>We do not work with any local CBOs or authorities to support the intervention.</p>	

future emergencies.	which is improved as a result.	preparedness.			
3.3: Competing groups and interests are recognised (political economy analysis), understood and efforts made to mitigate potential conflicts are built into design and process.	A wide range of community groups supports a collective understanding and facilitates access. We have processes in place to keep regularly updated and monitor and adapt to ensure we reach the most marginalised and mitigate conflict.	We have asked different local groups about competing interests, but have not been able to keep up-to-date / monitor or adapt our interventions.	We have asked the leaders to inform us of competing groups and the local political economy, and we understand the context from their perspective.	We do not try and understand our local context or have knowledge of different 'micro groups' or the local political economy.	

4. Information / Participation	Score 3	Score 2	Score 1	Score 0	
4.1: Men and Women have effective information about Rights and/or Entitlements, and Process delivered through multiple effective two-way channels.	Information about Rights & Entitlements and process is aligned to community needs, and shared through multiple channels of their choice. Information needs preferred channels, locations and times (e.g., for community meetings), are constantly updated with communities to ensure effective inclusion.	We share information to people about their Rights & Entitlements and Process, through <i>multiple channels</i> determined by us. We do not systematically monitor the quality, effectiveness or reach of information.	We share some information about Rights & Entitlements and process through one channel (e.g., local leaders).	We do not share information about Rights & Entitlements and process is not shared.	SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking XXX for the next intervention
4.2: Everyone feels represented* in decision making throughout the intervention. (e.g., Needs, Rights, Entitlements, Process or Monitoring, shelter design).	There is an equitable representation of groups, actively involved in decision-making. The community is involved with monitoring and adapting process to improve representation.	There are multiple groups represented (but not necessarily equitably) and involved in decision making. We do not monitor the quality of the representation.	There is one community member who says they represent everyone and is minimally involved in decision-making. We do not monitor the quality of the representation.	We do not give communities representation in decision-making for the intervention.	

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5. Reach & Action on Complaints	Score 3	Score 2	Score 1	Score 0	
5.1: Men and Women were consulted and involved in the design, operation and monitoring of feedback, complaints mechanisms (including preferred channels to use).	<p>The community have multiple ways to share complaints and wider information about their lives with us. The systems are co-designed with communities and well promoted. We have minimum SOPs for all mechanisms, and regularly track, review and action feedback.</p>	<p>We sometimes ask people to help design complaints mechanism(s), and we promote them so more people are aware. We log complaints, but do not analyse with a view to make changes. We do not systematically monitor the reach or quality of the mechanisms.</p>	<p>We ask people in power about how they want to reach us with any issues. We rely on them to promote the reach of the mechanism. We do not have SOPs for the mechanism nor monitor the reach or quality of them.</p>	<p>We do not ask people about preferred methods and channels to complain. We do not resource very well our complaints mechanism or have SOPs for it. We do not have a system for handling feedback or conversations.</p>	<p>SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking XXX for the next intervention</p>
5.2: Men and women know how to and can access responsive, safe, trusted mechanisms to report issues (including on fraud, corruption and abuse). PSEA Referral systems are active.	<p>Everyone knows how, and feels able to ask us questions and feels safe to share concerns knowing they will get a timely and effective response. We systematically track issues reported, and work with protection actors to respond through established referral pathways.</p>	<p>Men and women know how and where, and feel safe and able, to ask us questions about the intervention. We do not systematically track or respond or actively ask for discussion.</p>	<p>Community members in power (e.g., leaders/men) know how, and feel able and safe, to ask us questions about the intervention. We do not systematically track or respond or actively ask for discussion.</p>	<p>People do not know where how, and feel unable or unsafe to ask us questions about the intervention.</p>	
5.3: Field Staff and mobilizers are able to engage with and answer questions from communities knowledgeable, effectively and	<p>Field staff / mobilizers have information about intervention plans and feel able and confident to engage with people, and answer their questions and share information. We monitor the extent to</p>	<p>Field staff / mobilizers share critical one-way information messages from us. They also actively gather questions and concerns from people and filter what they know back to us. We sometimes</p>	<p>Field staff/ mobilizers share critical one-way information messages from us. They have a lot of useful information from the community but do not collate or answer questions from them. We</p>	<p>Field staff / mobilizers share critical one-way information messages from us. We do not monitor the quality of this process.</p>	

respectfully.	which we do this systematically, and action as possible.	monitor the quality of this process and sometimes react.	do not monitor the quality of this process.		
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6. Coordinated Response	Score 3	Score 2	Score 1	Score 0	
6.1: Coordination and Collaboration with international and local NGOs / CBOs, local government, community structures are strengthened.	We undertaken local mapping of community groups / agencies and systematically share information (assessments /monitoring) with each other. We collaborate and ensure we do not ask the same people the same questions.	We are aware of information gathered by other agencies and local community groups, and sometimes share and collaborate to support our interventions.	We are aware of some information gathered by other agencies and local community groups, but do not use it or collaborate to support interventions.	We do not coordinate information (including assessments and monitoring) or collaborate with other agencies and local community groups.	<p>SCORE: E.g., 2:</p> <p>CHALLENGE: Because of challenges X, Y, Z</p> <p>ACTION: We can overcome these by undertaking XXX for the next intervention</p>

7. Continuously / Rapidly Learn & Improve	Score 3	Score 2	Score 1	Score 0	
7.1: Community perceptions and assessment of quality of shelter/NFI Quality is systematically and actively sought.	The community actively works alongside us to systematically assess the quality of interventions. We systematically triangulate, track and action people's views (including discussing why we may not be able to do what is asked).	We ask people what they think about the quality of the intervention, but not systematically. We do not engage in conversations about to improve interventions / we do not take corrective actions.	We ask people in power about what they think and feel about the design or quality of interventions (e.g., Shelter /NFI), but do not engage more broadly or try and incorporate people's views.	We do not ask communities what they think or feel about the design or quality of interventions (e.g., Shelters/ NFI).	<p>SCORE: E.g., 2:</p> <p>CHALLENGE: Because of challenges X, Y, Z</p> <p>ACTION: We can overcome these by undertaking XXX for the next intervention</p>
7.2: Communities can expect delivery of improved assistance as organisations continually and rapidly learn from	We agree standards with the community. Men and women are encouraged to hold us to these standards, through systematic and proactive conversations. Communities rapidly monitor with us, and we	We ask men and women how we can improve most interventions, but not systematically. We do not share standards with communities and we do not rapidly or systematically strengthen	We sometimes ask people in power about how we can improve, and have an end-of-year-learning. We do not systematically translate this into rapid change of practice at field level. Most learning is for	We do not continuously or rapidly learn or improve our response. Learning and improvement is ad hoc and staff dependent. Learning s usually for managers or donors not for field staff or communities.	

experience and reflection and react to conversations with communities.	collectively & systematically strengthen learning and <i>improve interventions.</i>	learning / improve interventions through conversations and feedback.	managers or donors.		
7.3: Agencies commit to AAP through AAP inducted and skilled staff and budgets. Teams (led by AAP Ambassadors). Agencies hold regular feedback analysis and action meetings, and report next steps with communities.	We have an operational AAP Commitment. All staff including mobilizers are AAP inducted. This scorecard is used to design interventions, monitor and systematically take corrective action. We regularly monitor our progress over the life of programs. Staff systematically meet men and women to exchange information and discuss action plans.	We have an organisational AAP Commitment on paper; some Staff inductions include AAP. We do not have an AAP dedicated budget or AAP Ambassador. We sometimes use this Scorecard but do not change our interventions systematically or measure our own progress. Staff sometimes meet communities to exchange information.	We have an organisational AAP Commitment on paper; but Staff HR and program inductions do not include AAP. We do not have an AAP dedicated budget or an AAP Ambassador. We rarely use this Scorecard. Staff meet leaders to share information /analysis and next steps.	We do not have an organisational AAP Commitment. Staff do not meet regularly with the community to have conversations or share analysis / information.	

8. Staff Quality Mutual Respect	Score 3	Score 2	Score 1	Score 0	
8.1: Communities feel Field Staff and Mobilizers are skilled, respected, and responsive to their needs.	Field staff / mobilizers come from the community where possible and are inducted into AAP approaches. Communities lead design of safe ways to discuss issues about staff. We systematically monitor community perceptions of staff. All channels to reach us have SOPs that include active and safe referral pathways.	Men and Women can tell us about staff/mobilizer quality. We designed multiple channels for people to report staff safely; all channels have SOPs with referral pathways. But, we do not systematically monitor community perception of staff and do not know if people feel safe to report staff.	People in power can tell us about staff /mobilizer quality. Communities can report staff at a Help Desk but there are no SOPs for referrals. We do not systematically monitor the community perception of staff and do not know if it safe for them to report.	We do not ask communities what they feel about staff/mobilizers. We do not ask communities how staff quality can be improved. Communities do not have systematic and safe ways to report staff.	SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking XXX for the next intervention
8.2: All Staff and Mobilizers feel they are actively listened to by more senior staff, respected by	Managers proactively and systematically listen, learn and provide feedback to all staff on their concerns and rapid learning on	We usually induct field staff and mobilizers to AAP approaches and program quality. They are listened to and feedback	We usually induct field staff but not mobilisers. We do not ask them systematically what they think about interventions.	We do not induct field staff and mobilisers in AAP. We do not monitor or ask staff what they think about challenges and solutions to	

communities, safe in the field, and well inducted and trained.	interventions. All staff receive training on AAP and good engagement practices.	is provided, though not systematically.	Staff do not have systematic or confidential and safe ways to report issues.	interventions. Staff do not have systematic or confidential and safe ways to report issues.	
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9. Effective Efficient Ethical	Score 3	Score 2	Score 1	Score 0	
9.1: Communities are aware of resource use and deem this to be effective, efficient & ethical.	Communities are aware of financial information about interventions and have information about our mandate and commitment to AAP and quality. We actively seek ways to ensure communities can hold us to account safely and we are open to answering and taking corrective action as needed.	We share some financial information about interventions, and about our mandate, with men and women. People can hold us to account (for corruption, misuse, poor quality or inefficiency), but we are not open nor do we actively encourage or seek this.	We sometime provide those in power with financial information about interventions, and our mandate. We do not expect anyone can / will hold us to account for corruption /or misuse, poor quality or inefficient resource use.	We do not provide communities with financial information about interventions, or our mandate. We do not expect anyone can or will hold us to account for corruption or misuse, poor quality or inefficient resource use.	SCORE: E.g., 2: CHALLENGE: Because of challenges X, Y, Z ACTION: We can overcome these by undertaking XXX for the next intervention
9.2: Communities are aware of agencies commitment to AAP, which have been integrated into HR processes, SOPs, Strategies, Monitoring.	Communities support the development of AAP design in interventions and Program Cycle Management. The community systematically monitors progress of program quality with us.	We tell men and women about our commitment to AAP. AAP is integrated into Program Cycle Management, but not specifically for every intervention. We do not systematically monitor community perceptions of quality interventions.	We tell some people in power about our commitment to AAP. However, AAP is not really consistently integrated into all areas of our organisation and Intervention (or even Program) Cycle Management.	We do not tell communities about our commitment to AAP. AAP is not integrated into all stages of Program Cycle Management.	