USE CASE 2

Organizational referral
Sharing data on which organisations can provide what kind of support to whom
ACKNOWLEDGEMENTS

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Cover photo: The Vietnamese Red Cross have partnered with financial service providers in different provinces to arrange for local cash distributions. (Photo Credit: Vietnamese Red Cross)
PROBLEM SUMMARY

Humanitarian Outcomes estimates\(^1\) that there were around 5,000 organizations in the humanitarian system in 2021. These figures are likely an underestimate, particularly if we include the role played by local organizations in relation to protection referrals and referrals for other types of humanitarian services.

Figure 1. Breakdown of the humanitarian response by type of organization\(^2\)

<table>
<thead>
<tr>
<th>International NGOs'</th>
<th>Local/national NGOs'</th>
<th>International Red Cross and Red Crescent Movement (National Societies + ICRC + IFRC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>930</td>
<td>3,900</td>
<td>194</td>
</tr>
<tr>
<td>UN agencies</td>
<td></td>
<td>11</td>
</tr>
</tbody>
</table>

We can contrast this with the picture at country level. For example, the Uganda Refugee Response Plan\(^3\) includes 103 partners (14 government agencies, 10 UN agencies, 58 international non-governmental organization (INGOs) and 21 national NGOs), the Somalia Humanitarian Response Plan\(^4\) lists 335 partners and the Ukraine response\(^5\) 652.

The 2005 Humanitarian Reform Agenda introduced the ‘cluster approach’\(^6\). The particular sectors covered by clusters and sub-clusters varies depending on needs, available resources and how they have been operationalized at the regional, national or sub-national level.

However, the rapid increase in the use of multipurpose cash as a modality presents a challenge to this sectoral approach to coordination. For example, UNICEF (nutrition lead), the UN High Commissioner for Refugees (UNHRC) (protection lead), World Food Programme (WFP) and UN Food and Agriculture Organization (FAO) (food security co-leads), the International Federation of Red Cross and Red Crescent Societies (IFRC) and UNHRC (shelter co-leads) have all introduced cash as an additional modality to complement existing forms of support.

This increases the need for – and complexity of – effective coordination of cash, voucher and other primary forms of support for people in need of humanitarian assistance\(^7\). Associated with this is the potential for people in need of humanitarian assistance to have the choice of which organization provides them with what kind of support.

An additional and sometimes neglected dimension of the coordination challenge relates to protection cases. For this challenge to be met data must be shared to determine available referral pathways for protection cases. This challenge extends beyond the humanitarian sector to include a much wider range of organizations.

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6 Clusters are groups of humanitarian organizations – designated by the Inter-Agency Standing Committee (IASC) – with clear responsibilities for coordination and led by mandated UN agencies. OCHA has the lead role of coordinating the inter-cluster coordination group, developing the humanitarian needs overview/humanitarian response plan and supporting humanitarian country teams. See [www.humanitarianresponse.info/en/coordination/clusters/what-cluster-approach](http://www.humanitarianresponse.info/en/coordination/clusters/what-cluster-approach)
7 The Emergency Relief Coordinator’s Flagship Initiative may potentially tackle some of these challenges. See [https://www.thenewhumanitarian.org/analysis/2023/04/05/whats-flagship-initiative-emergency-aid](https://www.thenewhumanitarian.org/analysis/2023/04/05/whats-flagship-initiative-emergency-aid)
This use case explores the demand for greater interoperability and/or sharing of data on which organizations can provide what kind of assistance to which people. This does not include personal identifiable information about the people supported.

**How does this use case relate to the CVA business process?**

This use case relates to two stages in the cash and voucher assistance (CVA) business process. First, the ‘Intervention Set-up’ stage where decisions may be made on an integrated response to the needs identified. Second, the ‘Distribution Cycle’ stage where vulnerable households may be referred to partners for protection-related support.

**What are the variations of this use case?**

We define the core use case as being a way of describing and sharing information on:

- an organization, its mandate and what it does
- what kind of services and modalities the organization can provide (e.g. cash assistance, voucher assistance, food, seeds, registration of new people, counselling)
- to whom (e.g. orphans, survivors of gender-based violence)
- where (geographic focus areas)
- for how long (any funding window that limits their operations).

Two main variations are identified on the basis of the problem area. These are:

1. coordination among organizations to provide an integrated response package
2. coordination among organizations to provide effective protection referral pathways.

From a functional perspective both variations can be covered under the core use case. However, they may involve different groups of organizations and hence are worth exploring separately.

This use case does not cover sharing personal data on people to facilitate a referral for another service. This is covered by use case three (Individual referral – Sharing data on a person with a partner, donor or government for follow-up services).

**To what extent is this use case relevant to the practitioners consulted?**

This use case was relevant to the practitioners consulted. The need for effective referral pathways and mechanisms was recognized, but rarely seen in practice. Some examples were given of referrals mechanisms within cash consortia. This is an example of an area which appears to be underdeveloped.

The concept of integrated programmes (or deduplicated multi-service assistance packages) is gaining increasing importance. Several respondents cited this as a priority and there is evidence that this has been implemented to varying degrees at the country level. Examples are discussed later in this report.

**To what extent – and in which ways – does this use case prevent people from receiving dignified humanitarian assistance?**

There is limited research to understand the perspectives of recipients of humanitarian assistance in relation to this use case. One example is the mapping of user journeys of women in Somalia by Ground Truth Solutions. Its research found two key challenges related to this use case. First, the lack of knowledge about which support is available to them and related concerns that the information they do receive may be inaccurate. Second, a lack of information on what criteria are applied to determine eligibility.

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Improved sharing of data on which organizations can provide what kind of assistance to which people would directly respond to these challenges. However, most outreach to people needing assistance is framed around the support offer of a certain programme, not the full range of assistance available to people in a certain area.

A more people-centred approach would help minimize the challenges voiced in the research described above. Shared data on types of support available would presumably enable greater investment in adequate and timely communication with people, helping them to understand the type of support available and which criteria are applied to determine who receives what, when and for how long.

Another important consideration is the potential for choice. Timely and accurate data on which organizations can provide which kind of humanitarian assistance could (if communicated well) enable people in need to choose which provider they use. This is a potentially transformative change in how humanitarian assistance is provided.

We found no evidence to assess the impact of the protection aspect of this use case on vulnerable households. We assume that lack of accurate data on referral pathways would lead to delays in referrals and potentially lack of referrals in some cases.

**How do practitioners currently address this use case?**

Practitioners respond to this use case in a number of ways.

**Information Management Working Groups**

The UN Office for the Coordination of Humanitarian Affairs (OCHA) convenes an Information Management Working Group. This is an inter-agency working group on information management for humanitarian organizations at the global level. The group is mirrored at the country level and serves as the forum for strategic and technical discussions and collaboration on information issues relating to humanitarian response and preparedness. This includes responsibility for creating and disseminating information on who does what and where, as well as contact lists.

The Nyumanzi settlement fact sheet published by the Uganda Information Management Working Group is an example. This includes a summary of partner organizations with competencies related to protection (9 partners), water, sanitation and hygiene (4 partners), education (3 partners), food assistance (2 partners), livelihoods and environment (3 partners), health and nutrition (4 partners) and shelter (2 partners).

The focus of this exercise may be just to provide an indication of operational presence as well as potentially a general understanding of ongoing response and therefore potential gaps. It may also go further to understand operational capacity (i.e. which organizations are present in which areas of the country).

While we did encounter some data collection tools that include information on types of assistance, modalities and timeframes, this level of detail is not reflected in examples of data published. The level of detail publicly available is generally not sufficient – nor is it updated frequently enough – to guide integrated programming or protection referral pathways.

The process to gather this type of data is usually linked to coordination meetings, supplemented by emails and phone calls. Excel appears to be the tool most often used to gather and process the data, with some examples of KoBo surveys also being used. Many examples also use Humanitarian Exchange Language (HXL) tags to structure the data.

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**ResponseBuilder**

ResponseBuilder\(^{12}\) is a collaboration modelling tool – created by the Collaborative Cash Delivery Network (CCD) – that helps humanitarian actors design a collaborative cash delivery model. This tool is meant to be used during the design phase after completing the assessment and analysis phases of a response.

The tool helps a group of organizations design a coordinated response plan. This includes the overall programme objective, delivery mechanism, modality, targeting criteria and transfer value, duration and frequency.

The website states that it will in future allow for definition of sectoral and protection roles. If implemented, this could respond well to the problem identified in this use case.

**Government of Uganda Refugee Response Monitoring e-System**

This is an example of a government-led coordination tool. The partners who wish to implement refugee response interventions in Uganda are expected to apply electronically through the system.\(^{13}\) The system then tracks monthly progress in the implementation of refugee responses. We were not able to determine the granularity of the information collected. However, this provides an example of a national-level system that collects data on the response.

**Current blockages and challenges**

**Governance challenges**

The cluster system is well established and provides the framework for humanitarian coordination, including referrals at the country level. Some respondents commented on challenges with inter-cluster coordination (e.g. multi-purpose cash), however, which may limit understanding of the potential need and feasibility for referrals across sectors and between clusters.

**Technical challenges**

There are a variety of mechanisms for collecting data from implementing partners. There are also examples of initiatives and standards to learn from and build on.

**Operational challenges**

There are important operational challenges to overcome. Addressing this use case would require regular and standardized reporting from a wide range of organizations and across clusters. For those involved in providing a humanitarian response, monthly reporting would likely be required. For those with capacity and presence to handle protection referrals, this would ideally also be monthly, but could be less frequent.

Careful consideration is needed on incentives to encourage reporting. The Ugandan government-led example could be instructive. This appears to link reporting to government legislative compliance. Another incentive to explore would be linking compliance to funding eligibility.

‘Stick’-related incentives should be contrasted with building a stronger case for this approach. This could include the time it will save with coordination, the money it could save with better targeting and the potential for improved support to recipients of humanitarian assistance.

**Data protection and privacy challenges**

This use case does not include personal information, which minimizes data protection challenges. Some respondents however mentioned that organizations hesitate to share all programme-related information publicly with communities, mainly for staff security reasons.

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\(^{12}\) See [https://response-builder.web.app/public](https://response-builder.web.app/public)

Data protection regime

The purpose of data sharing for this use case is improved coordination, programme design and implementation alongside improved referral pathways. It does not include personal data. No legal basis is required as it does not involve personal data.

Cost impact

We were not able to estimate the cost impact of solving or not solving this use case. It is clear that the costs of coordination are considerable and increase as the number of organizations involved increases.

Research from the UK public sector\(^{14}\) provides one data point to understand the potential cost implications. It found that adopting a common data standard could result in savings of 7 million British pounds in adult social care nationally a year and savings of up to 73,096 British pounds a year from direct costs (across a typical upper-tier geographic area).

Further research is needed to develop a methodology to estimate the cost savings for the humanitarian sector.

Potential approaches to solve the use case

Human Services Data Specification

The Human Services Data Specification (HSDS, sometimes referred to as the ‘open referral format’) is an exchange format for publishing machine-readable data about health, human and social services: their locations, and the organizations that provide them. ‘Human services’ are taken to include any organizational resource that is made available for a person in need – such as food assistance, job training and childcare.

The HSDS is a consistent way of recording and sharing information about services. It provides standardized ways for:

- organizations to describe the services that they offer
- API endpoints to be published that enable these services to be discoverable and queried
- dynamic service directories to be created and maintained.

While this is a global standard, one of the most mature examples of adoption is in the UK. OpenReferral UK defines a standard structure to meet this need for a consistent way of gathering and using data. It has been adopted by 12 public bodies. A further eight are in the process of adopting it and another eight are considering it.

The data standard covers the following concepts:

- an organization
- a service
- a service taxonomy
- a service at a location
- a location
- eligibility criteria
- service coverage area
- disability access.

Further technical documentation is available at: [https://developers.openreferraluk.org](https://developers.openreferraluk.org)

The creation of dynamic service directories presents an interesting linkage with CCD work on data portability and digital identities. Such a digital identity could potentially include the information necessary to establish eligibility.

This could then be matched with providers from the service directory that offer assistance matching the eligibility profile. Depending on the range of providers available, this may even introduce an element of choice for the recipient in terms of modality, type of assistance and provider.

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14 Snook. 2019. OpenCommunity Discovery: The case for a community-based services data standard. [https://files.esd.org.uk/hYDmO/](https://files.esd.org.uk/hYDmO/)
THE FUNDAMENTAL PRINCIPLES OF THE INTERNATIONAL RED CROSS AND RED CRESCENT MOVEMENT

**Humanity**
The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

**Impartiality**
It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality**
In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence**
The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

**Voluntary service**
It is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity**
There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality**
The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.
The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world’s largest humanitarian network, with 192 National Red Cross and Red Crescent Societies and around 14 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.