Community Engagement
Tackling Structural Barriers to Community Participatory Processes & Accountability in Operations

Project Summary

Problem
Address the disparity between MSF’s intent to increase community engagement at program level and the current MSF institutional policy, operational documents. Community engagement is often not prioritized and there is a lack of guidance on the processes. The current systematic way of working does not promote participatory processes with communities within the operational decision-making consistently throughout the humanitarian project cycle.

Proposed Solution
Better understand and systematically embed community participatory processes by developing tools and capacity building to help operational staff in projects, missions, and operational cells to address structural barriers to community engagement. Provide clear objectives for community engagement. Capitalize on existing initiatives/TICs (lessons learned) and build concrete outputs: a monitoring framework and participatory approaches from exploratory missions to exit strategies in the project cycle.

Potential Impact
- Increases agency for communities and patients
- Includes community engagement principles in medical-humanitarian interventions, in HR job profiles and learning events (both for field and HQ staff)

Viability
- Supported by OCB Operations / Operations Director
- Creates a Community Engagement Barometer (M&E framework)
- Targets a Capacity Building Program and Community of Practice – builds upon learnings from initiatives

Risk Mitigation
- Test-and-learns use of the barometer (M&E) across multiple contexts

Scalability
- Engages with individuals from Southern Africa, Central & Western Africa, MENA, LATAM, Southeast Asia, as well as the project managers of other ongoing Community Engagement TICs, and regional positions (e.g., Regional Health Promoters)

Area/Type: Operations
Sponsor/Support: MSF OCB
Length/Project Status: 2 years; ONGOING