

FSAC YEMEN
Food Security and Agriculture Cluster**AAP INDICATOR BANK**
Comprehensive Library of SMART Accountability to Affected People
Indicators
for All Stages of the Humanitarian Programme Cycle

Document Type	Owner	Version	Date	Applies To
FSAC AAP Tool — Annex A	FSAC Yemen AAP Technical Working Group	1.0	June 2026	All FSAC Partners — National and Sub-National

How to Use This Indicator Bank

This Indicator Bank provides a comprehensive, ready-to-use library of SMART (Specific, Measurable, Achievable, Relevant, Time-bound) indicators for integrating Accountability to Affected People (AAP) across all stages of the Humanitarian Programme Cycle (HPC). It is organized by HPC phase so that partners can quickly identify relevant indicators for their programme stage.

Instructions for Partners

- STEP 1: Identify your programme phase (e.g., Needs Assessment, Implementation).
 STEP 2: Review all indicators in that phase section.
 STEP 3: Select a minimum of 3–5 indicators per phase relevant to your programme.
 STEP 4: Adapt targets to your operational context, scale, and baseline data.
 STEP 5: Integrate selected indicators into your MEAL framework, logframe, and PDM tools.
 STEP 6: Report against these indicators monthly (internal) and quarterly (to FSAC cluster).

Note: Indicators marked ★ are MANDATORY for all FSAC partners regardless of programme type.
 Indicators marked ♦ are recommended for programmes with specific focus areas.

Column	Explanation
Indicator Code	Unique reference code for the indicator (e.g., PREP-01, NA-03)
Indicator	The measurable statement of what is being tracked
Disaggregation Required	Minimum disaggregation categories for data collection
Means of Verification	How and where data will be collected to verify the indicator
Baseline Source	How to establish the starting point before the programme
Target	Recommended minimum target; partners should set context-specific targets
Frequency	How often data should be collected and reported
Reference Standard	The international standard or framework the indicator links to
★ / ♦	★ = Mandatory for all partners; ♦ = Recommended for specific programme types

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PREPAREDNESS AND ANTICIPATORY ACTION

Indicators for establishing AAP systems, capacities, and partnerships before crisis onset or at programme start.

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ PREP-01	% of operational areas with a documented Community Profile covering communication preferences, trusted channels, and key community structures, disaggregated by sex, age, and disability	Sex / Age / Disability / Location	Community profile documents; field visit validation reports	Baseline assessment of existing profiles	100% by Q2 each year	Quarterly	CHS Commitment 1; IASC AAP
★ PREP-02	% of formal partnership agreements with local actors that include explicit AAP roles, responsibilities, and CFM referral procedures	Type of partner (INGO/NNGO/CBO)	Partnership agreement review	Document audit at programme start	100% of all partnerships	At signing; annual review	Grand Bargain; CHS Commitment 1
★ PREP-03	% of assessment tools and IEC materials pre-tested with community representatives including women, PWDs, and youth before deployment	Sex / Age / Disability status	Pre-testing records; field notes; adaptation logs	None (pre-programme)	100% before each deployment	Before each assessment	CHS Commitment 4; SPHERE
★ PREP-04	% of female assessment and field staff on each deployment team	N/A (this is the disaggregation)	HR records; team rosters	Baseline staffing review	Minimum 30%; target 50%	Per deployment	IASC AAP Gender Handbook
★ PREP-05	% of local enumerators and facilitators trained on AAP principles, ethical data collection, and disability-inclusive engagement before each assessment	Sex / Location / Organization type	Training attendance sheets; post-training assessment scores	None (pre-training)	100% before each deployment	<i>Before each assessment</i>	CHS Commitment 7; FSAC SOP
◆ PREP-06	Number of Anticipatory Action (AA) protocols that include documented community consultation on trigger criteria and anticipated assistance types	Location / Authority area (IRG/SBA)	AA protocol documents; consultation minutes	Baseline AA protocol review	100% of AA protocols	At AA protocol development	gFSC AA Framework

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
◆ PREP-07	% of contingency plans that include disability-accessible communication and feedback provisions	Disability type	Contingency plan document review	Document audit	100%	Annual	IASC Disability Inclusion Guidelines
◆ PREP-08	Number of active formal partnerships with OPDs, women-led organizations, or CBOs with documented AAP roles per operational governorate	Organization type / Governorate	Partnership agreements; MoU registry	Mapping of existing partnerships	Minimum 1 per governorate	Semi-annually	Grand Bargain; CHS Commitment 1
◆ PREP-09	% of preparedness activities involving local actors (CBOs, OPDs, women-led organizations, local NGOs)	Organization type / Location	Meeting minutes; activity reports; partnership records	Baseline mapping of participation in preparedness activities	Minimum 80% of preparedness activities	Quarterly	Grand Bargain; CHS Commitment 1
◆ PREP-10	% of community members consulted reporting that their priorities and concerns were considered during preparedness planning	Sex / Age / Disability / Location	Community consultation records; perception surveys	Baseline perception survey at programme start	Minimum 70% of respondents	Annual / Per preparedness cycle	CHS Commitment 4; IASC AAP

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NEEDS ASSESSMENT AND ANALYSIS

Indicators for ensuring assessments are participatory, inclusive, and produce disaggregated data that reflects the needs of all community segments.

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ NA-01	% of needs assessments that incorporate at least two participatory methods (e.g., FGD + community consultation + direct observation)	Method type / Location / Authority area	Assessment design documents; field methodology notes	None (pre-assessment)	80–100% of all formal assessments	Per assessment	CHS Commitment 4; SPHERE Chapter 1
★ NA-02	% of assessments collecting sex, age, disability and displacement-disaggregated data	Sex / Age group / Disability status	Assessment reports;	Baseline data quality review	100%	Per assessment	IASC AAP Framework; WG Short Set

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ NA-03	% of assessments where female enumerators conducted all interviews with female respondents	Sex of enumerator / respondent	Team composition records; field supervision notes	Staffing baseline	100%	Per assessment	IASC Gender and AAP Handbook
★ NA-04	Number of distinct community representative groups involved in assessment tool design per operational location (must include women, youth, and PWDs as minimum)	Group type / Sex / Age / Disability	Meeting records; participant lists; attendance sheets	None (pre-assessment)	At least 4 distinct groups per location	Per assessment	CHS Commitment 4
★ NA-05	% of assessments where findings were shared back with participating communities within 30 days of assessment completion in an accessible format	Location / Language / Format	Post-assessment community feedback session records; local radio scripts; meeting notes	None	80%	Per assessment	CHS Commitment 2; IASC AAP
★ NA-06	% of assessments integrating a real-time community feedback channel to allow communities to respond to the assessment process itself	Channel type / Location	Assessment design; CFM activation records	None	100%	Per assessment	CHS Commitment 3; FSAC CFM SOP
◆ NA-07	Number of community consultation meetings held during the assessment process per operational location	Sex of participants / Location / Community group	Meeting records; participant lists	None	Minimum 2 per location	Per assessment	CHS Commitment 4
◆ NA-08	% of assessment data that is collected using digital tools with secure, password-protected storage	N/A	Data management protocols; tool configuration records	Data management audit	80%	Per assessment	WFP Data Protection Guide; CHS
◆ NA-09	% of assessment reports that include a dedicated section on barriers to access and participation for marginalized groups	Group type (women/PWD/IDP/elderly)	Assessment report review	Baseline report audit	100%	Per assessment	SPHERE; IASC Disability Guidelines

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
◆ NA-10	% of assessments with participants reporting that they were able to express their views and priorities during assessments	Sex / Age / Disability / Location	Assessment feedback forms; perception surveys	Baseline perception survey at first assessment	Minimum 80% of respondents	Per assessment	CHS Commitment 4; IASC AAP

3 STRATEGIC PLANNING

Indicators for ensuring that planning processes are grounded in community priorities, include adequate AAP resourcing, and integrate inclusion standards.

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ SP-01	% of FSAC project proposals that include a dedicated, funded AAP budget line item (covering CFM, IEC materials, consultations, disability access, and AAP staff time)	Project type / Partner type	Project budget documents; proposal review	Baseline budget audit	100% of projects; min. 3% of project budget	Per proposal cycle	CHS Commitment 1; Grand Bargain
★ SP-02	% of project logframes that include at least 2 SMART AAP or inclusion indicators disaggregated by sex, age, and disability	Project type / Partner	Project design documents	Logframe review	100%	Per proposal	IASC AAP Framework; CHS
★ SP-03	% of projects where project design and targeting criteria are demonstrably informed by documented community input	Sex / Age / Community group	Consultation records; Project proposals; Project design documents	None	100%	Before launch	CHS Commitment 4; IASC AAP
★ SP-04	% of projects applying the IASC Gender and Age Marker (score 2a or 2b minimum) at design stage	Project type	Project document; GAM score records	Baseline marker application rate	100%; minimum GAM score 1	Per proposal	IASC GAM

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ SP-05	Number of accessible CFM/feedback channels included in project design per operational location (at minimum 2, including 1 non-literacy-dependent channel)	Channel type / Location	Project CFM plan; proposal narrative	Baseline channel availability	At least 2 per location	Per proposal	IASC AAP; FSAC CFM SOP
◆ SP-06	% of project exit/transition strategies informed by community consultation on sustainability and handover preferences	Sex / Community group	Project design; consultation records	None	100% of multi-year projects	Per proposal	CHS Commitment 9; Grand Bargain
◆ SP-07	% of cluster-level strategic documents (HNO/HRP) that include documented community validation with marginalized group representation	Sex / Age / Disability / Displacement status	Strategic document review; validation session records	None	100%	Annual HPC cycle	IASC AAP Framework
◆ SP-08	% of community members who can correctly identify targeting criteria, assistance entitlements, and available complaint channels	Sex / Age / Disability / Location	Post-distribution monitoring (PDM) reports; community surveys	Baseline PDM assessment at project start	Minimum 80% of respondents	Per distribution cycle / mid-term	CHS Commitment 2; IASC AAP

4
RESOURCE MOBILIZATION

Indicators for tracking the adequacy of AAP resourcing and advocacy for funding of accountability activities.

Cod e	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequenc y	Reference
★ RM-01	% of funded projects with dedicated resources allocated for community engagement , information sharing, and feedback mechanism	Project type / Donor	Budget documents; financial reports	Baseline budget audit	100% of projects; min. 3% of project budget	Per funding cycle	CHS Commitment 1; Grand Bargain

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ RM-02	% of local partner sub-grants that include adequate resourcing for CFM establishment, operation, and IEC material development	Partner type / Location	Sub-grant agreements; budget annexes	Sub-grant review	100% of sub-grants	Per sub-grant	Grand Bargain Localization Commitments
◆ RM-03	Number of formal FSAC advocacy messages communicated to donors addressing AAP funding requirements per year	N/A	Advocacy documents; donor meeting records; cluster correspondence	None	Minimum 2 per year	Annual	FSAC AAP Strategy
◆ RM-04	% of funded projects with dedicated resources allocated for inclusion measures (women, PWDs, older persons, marginalized groups).	Group type (women/PWD/elderly/marginalized) / Project type	Project proposals; budget breakdowns; inclusion plans	Baseline review of inclusion budgeting	Minimum 80% of projects	Per funding cycle	IASC Disability Inclusion Guidelines; CHS Commitment 4

5
IMPLEMENTATION AND MONITORING

Indicators for tracking operational AAP performance during programme delivery, including CFM functionality, community awareness, and adaptive management.

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ IM-01	% of beneficiaries who can correctly identify targeting criteria, beneficiary entitlements and at least one complaints channel	Sex / Age / Disability / Displacement status	PDM reports; community orientation records	PDM at baseline (before distribution)	90%	Per distribution activity	CHS Commitment 2; IASC AAP
★ IM-02	% of beneficiaries who report confidence in and willingness to use available CFM channels	Sex / Age / Disability	PDM reports; satisfaction surveys	PDM after first distribution	75%	Per distribution	CHS Commitment 3
★ IM-03	% of feedback and complaints acknowledged within 3 working days of receipt	Complaint type / Channel / Location	CFM log; monthly CFM report	CFM baseline audit	90%	Monthly	FSAC CFM SOP; CHS Commitment 5
★ IM-04	% of feedback and complaints resolved within 15 working days	Complaint category / Location	CFM log; resolution tracking sheet	CFM baseline audit	85%	Monthly	FSAC CFM SOP; CHS Commitment 5

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ IM-05	Number of PDM exercises conducted per distribution activity (minimum 1, within 4 weeks of distribution)	Sex / Age / Disability / Displacement	PDM reports	None	1 per distribution, within 4 weeks	Per distribution	FSAC PDM Tool
★ IM-06	Number of documented programme adaptations made based on community feedback per project cycle	Adaptation type / Source of feedback	Programme adaptation log; meeting minutes	None	Minimum 3 per project cycle	Quarterly	CHS Commitment 5; IASC AAP
★ IM-07	% of distributions where community orientation was conducted before assistance delivery, covering entitlements, targeting criteria, and CFM channels	Location / Sex of audience	Field activity reports; orientation attendance records	None	100%	Per distribution	CHS Commitment 2; IASC AAP
★ IM-08	% of SEA/GBV complaints received through the CFM that were referred to the PSEA focal point within the same working day	N/A (confidentiality)	PSEA referral log (anonymized)	None	100%	Monthly	IASC PSEA-AAP Linkages; CHS
★ IM-09	% of project sites with at least two functioning and accessible feedback and complaints channels, including confidential options for women and SEA-related complaints	Channel type / Location	CFM records; field monitoring reports	None	100% of active channels	Weekly	FSAC CFM SOP
◆ IM-10	% of beneficiaries satisfied with the quality, quantity, and timeliness of assistance received (PDM)	Sex / Age / Disability / Displacement	PDM satisfaction survey	First PDM	70%	Per distribution	CHS Commitment 6; SPHERE
◆ IM-11	% of community feedback sessions held on schedule (minimum monthly in active implementation areas)	Location / Sex of participants	Community feedback session records	Planned schedule	90%	Monthly	CHS Commitment 4
◆ IM-12	% of IEC materials available in accessible formats (pictorial/audio/large print) at all distribution and registration points	Format type / Location	Field monitoring reports; distribution point observation	Baseline IEC audit	100%	Per distribution	IASC Disability Inclusion Guidelines

6
OPERATIONAL PEER REVIEW AND EVALUATION

Indicators for ensuring that evaluations systematically incorporate community perspectives and that lessons learned are applied to future programming.

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ EV-01	% of evaluations or reviews in which affected people directly contributed to findings, recommendations, or lessons learned	Sex / Age / Disability / Displacement	Evaluation reports; review report	None	100% of all formal evaluations	Per evaluation	CHS Commitment 6; IASC AAP
★ EV-02	% of evaluations that include a participatory community lessons-learned session with representatives from women, PWDs, youth, and IDPs	Sex / Age / Disability / Displacement	Evaluation ToRs; session notes; participant lists	None	100%	Per evaluation	CHS Commitment 4
★ EV-03	% of evaluation findings shared with participating communities within 60 days of evaluation completion in an accessible format	Location / Format	Community feedback session records; local communication records	None	80%	Per evaluation	CHS Commitment 2

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ EV-04	% of lessons learned from CFM data and evaluations formally documented and demonstrably applied in subsequent programme design	Lesson type	Learning briefs; programme design comparison documents	None	100%	End of project + at new proposal	CHS Commitment 5
◆ EV-05	% of CFM logs and programme feedback data reviewed in OPR/evaluation process	N/A	Evaluation methodology note; data sources annex	None	100%	Per evaluation	CHS Commitment 5; IASC AAP
◆ EV-06	Number of programme improvements or adaptations implemented as a result of community feedback, monitoring findings, or evaluation recommendations	Change type	Programme review reports, Project change log; meeting minutes	None	Minimum 5 per project cycle	End of project	CHS Commitment 5

7
COORDINATION

Indicators for tracking cluster-level AAP performance, including partner reporting, inclusive participation in coordination, and collective learning.

Code	Indicator	Disaggregation	Means of Verification	Baseline Source	Target	Frequency	Reference
★ CO-01	% of FSAC cluster meetings (national and sub-national) that include AAP as a standing agenda item with partner reporting	Level (national/sub-national)	Cluster meeting agendas; meeting minutes	Baseline audit of agendas	100%	Monthly	IASC AAP Framework; FSAC TOR
★ CO-02	% of FSAC strategic documents (HNO, HRP, cluster response strategy) that document community validation with marginalized group representation	Group type	Strategic documents; validation session records	None	100%	Annual HPC cycle	IASC AAP; CHS Commitment 4
★ CO-03	Number of local NGO/CBO representatives participating in FSAC cluster meetings disaggregated by governorate	Governorate / Organization type	Attendance records	Baseline participation mapping	Minimum 3 per sub-national cluster meeting	Monthly	Grand Bargain; FSAC TOR
◆ CO-04	Number of FSAC AAP learning briefs produced and disseminated to all partners per year	N/A	AAP TWG records; dissemination records	None	Minimum 2 per year	Bi-annually	FSAC AAP Strategy
◆ CO-05	% of FSAC partners reporting on AAP activities in coordination updates (CFM trends, community consultations, adaptations made)	Partner type (INGO/NNGO/UN)	Cluster reporting tracker	Baseline reporting rate	70% reporting regularly; 100% quarterly	Monthly/Quarterly	FSAC AAP Strategy
◆ CO-06	% of sub-national clusters with an active AAP focal point or AAP champion organization	Governorate	Sub-national cluster records	None	100% of active sub-national clusters	Semi-annually	FSAC TOR

FSAC AAP Partner Self-Assessment Dashboard

Partners should use this self-assessment table quarterly to score their own AAP performance against mandatory indicators. Scores should be shared with the FSAC AAP TWG as part of quarterly reporting.

Scoring Guide

- 4 = Fully met: Target achieved and evidence available.
3 = Substantially met: Target mostly achieved; minor gaps.
2 = Partially met: Progress made but significant gaps remain.
1 = Minimal: Activity started but well below target.
0 = Not started: No action taken.

Indicator Code	Indicator (Short Title)	Target	Score (0–4)	Evidence / Notes	Action Required
PREP-01	Community Profiles complete	100%			
PREP-02	Local partnership AAP clauses	100%			
PREP-03	Tools pre-tested	100%			
PREP-04	Female staff %	≥30%			
PREP-05	Enumerator training	100%			
NA-01	Participatory assessment methods	80–100%			
NA-02	Disaggregated data	100%			
NA-03	Female enumerators for women	100%			
NA-05	Findings shared back	80%			
NA-06	Real-time CFM in assessments	100%			
SP-01	AAP budget line	100%			
SP-02	AAP indicators in logframe	100%			
SP-03	Targeting criteria validated	100%			
SP-06	CFM channels in design	≥2 per location			
IM-01	Beneficiary awareness (PDM)	90%			
IM-02	CFM confidence (PDM)	75%			
IM-03	Complaints acknowledged 3 days	90%			
IM-04	Complaints resolved 15 days	85%			
IM-05	PDM per distribution	1 per dist.			
IM-06	Programme adaptations	≥3/cycle			
IM-07	Pre-distribution orientation	100%			
IM-08	SEA referral same day	100%			

Indicator Code	Indicator (Short Title)	Target	Score (0–4)	Evidence / Notes	Action Required
EV-01	Perception survey in evaluation	100%			
EV-03	Findings shared with community	80%			
EV-04	Lessons applied to next design	100%			
CO-01	AAP on cluster agenda	100%			
CO-02	Strategic docs validated	100%			
CO-03	Local NGO cluster participation	≥3/meeting			

TOTAL SCORE: _____ / 108 **Partner:** _____ **Date:** _____