

INTER-AGENCY STANDING COMMITTEE
AD HOC WORKING GROUP MEETING ON
HUMANITARIAN RESPONSE REVIEW FOLLOW-UP

**Humanitarian Response Review - Actionable
Recommendations**

24 January 2006
Palais des Nation, Room H.3
Geneva

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I Background

The meeting of the IASC Reference Group (RG) on the Humanitarian Response Review (HRR) took place on 3 November 2005. The primary objective of the meeting was to review the outstanding recommendations of the HRR for possible implementation. In order to facilitate this process, OCHA prepared a Matrix outlining actionable recommendations of the HRR, with suggestions to classify these recommendations into the following groups:

1. Recommendations relevant to the Cluster Working Groups
2. Recommendations to be addressed through process identified at the IASC Working Group Retreat, in September 2005
3. Outstanding Recommendations
 - i Addressed to the IASC
 - ii Addressed to the ERC/OCHA
 - iii Addressed to donors

The participants to the meeting were requested to review these recommendations and suggestions for classifications, and to provide initial comments. The feedback provided by the meeting participants as well as comments received by the members of the IASC RG on the HRR through emails are summarized below.

The below matrix was shared with the IASC WG members as a background document for the 63rd IASC WG Meeting held on 21-22 November 2005.

II Matrix of Actionable Recommendation

Recommendation	Follow up action to be taken	Comments and classifications suggested by Yvette Stevens Chairperson of the IASC HRR Reference Group to the 3 rd November 2005 meeting	Key Issues/comments made at the 3 rd November 2005 HRR IASC Reference Group meeting
<p>i. The humanitarian organizations should continue, in an appropriate framework, including at the level of the IASC, the mapping exercise to cover more completely the capacities of the Red Cross/Red Crescent Movement and the NGO community, as well as to address deployable capacities of other actors, such as the private sector and the military.</p>	<p>Map existing capacities and gaps</p>	<p>Classification: 1 Addressed through the cluster approach. Private Sector should be addressed through separate efforts. The Military sector to be addressed through “service package”</p>	<ul style="list-style-type: none"> ▪ IFRC: The issue should be dealt with through Regional, National and Local level contingency planning
<p>ii. The IASC organizations should actively pursue and measure the reform processes in their respective organizations, as well as the improvement of the CAP process, through the establishment and the application of different sets of benchmarks. Priority should be given to</p> <ul style="list-style-type: none"> ▪ internal management benchmarks related to the organizations’ preparedness as well as their assessment and planning capacities, in particular at field level. (Action: All – immediately) ▪ a limited number of process and impact benchmarks for the CAP or other forms of appeal. (Action: All – immediately) 	<p>Establish and apply benchmarks</p>	<p>Classification: 2 Discussed at IASC Working Group Retreat on 6-7 September; Tag on to existing DFID-led process; identify gaps to be addressed by IASC after DFID process.</p>	<ul style="list-style-type: none"> ▪ IFRC: Need for a broad discussion on benchmarks in the IASC ▪ ICVA: On the overall point on benchmarks, there is need to identify and integrate also what the Dfid-process does not cover

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<p>iii. The IASC should develop a strategy to promote cross-fertilization amongst organizations on best practices related to the use and the development of benchmarks and to ensure appropriate coherence in particular in preparedness and in the CAP process (at country level).</p>	<p>Tag on existing process led by DFID (external benchmarking)</p>	<p>Classification: 2</p> <p>Discussed at IASC Working Group Retreat on 6-7 September; Tag on to existing DFID-led process; identify gaps to be addressed by IASC after DFID process.</p>	
<p>iv. The IASC and the donors should establish a limited set of benchmarks (and indicators) to be implemented in the first period of a new emergency up to a maximum of 3 months and addressing in priority</p> <ul style="list-style-type: none"> ▪ access and coverage of population in need ▪ identification of responsibilities in delivery of assistance and in coordination ▪ resources mobilization (human, assets, financial) ▪ identification of relevant lifesaving activities ▪ protection aspects, where needed. <p>Organizations and donors should agree on it and test it over a 3-year period, starting in 2006, before becoming the reference set. (Action: ERC/IASC with Donors – immediately)</p>	<p>Tag on existing process led by DFID (external benchmarking)</p>	<p>Classification: 2</p> <p>Discussed at IASC Working Group Retreat on 6-7 September; Tag on to existing DFID-led process; identify gaps to be addressed by IASC after DFID process.</p>	

2.1 International Humanitarian Organization's Preparedness and Capacity

Recommendation	Follow up action to be taken	Comments and classifications suggested by Yvette Stevens Chairperson of the IASC HRR Reference Group to the 3 rd November 2005 meeting	Key Issues/comments made at the 3 rd November 2005 HRR IASC Reference Group meeting
v. Humanitarian organizations should reassess continuously, through an extended mapping of material and human resources in all sectors, their declared response capacities as compared to credible thresholds, below which a declared capacity becomes operationally irrelevant. (Action: All/IASC for threshold definition)	Define credible thresholds	Classification: 1 Addressed to Clusters	<ul style="list-style-type: none"> ▪ WHO: Inter-Cluster issues must be addressed. ▪ OCHA: Cross-cutting issues will be discussed at the IASC WG in November (work of IASC Subsidiary Bodies and Cluster Working Groups).
vi. The IASC should identify and assign lead organizations with responsibility at sectoral level, especially in relation to IDP protection and care and develop a cluster approach in all priority sectors. (Action: ERC/IASC – immediately)	<p>In preparation of the 62nd IASC WG Meeting, Cluster Working Groups of the following clusters worked throughout the summer on defining the responsibilities of cluster leads and proposing lead agencies for each cluster, which were then endorsed by the IASC Principals meeting on 12 September:</p> <p>Protection - UNHCR, Health - WHO, Water and Sanitation - UNICEF, Nutrition and Feeding - UNICEF, Camp Coordination and Management - UNHCR, Shelter - UNHCR, Logistics - WFP, Telecommunications – OCHA, UNICEF, WFP, Early Recovery - UNDP.</p>	Classification: 1 Cluster approach to address this	

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<p>vii. The IASC should accelerate the establishment of common standards and guidelines at sector level, in recruitment or training policies, as well as for material assets in order to facilitate interoperability in the different networks and between networks. It should establish a work programme with identified issues and a timeframe for results, on a yearly basis. (Action: ERC/IASC Principals for decisions on priorities before end 2005; IASC WG for implementation, starting in 2006)</p>	<p>In preparation of the 62nd IASC WG Meeting, Cluster Working Groups of the following clusters worked throughout the summer on defining the responsibilities of cluster leads and proposing lead agencies for each cluster, which were then endorsed by the IASC Principals meeting on 12 September:</p> <p>Protection - UNHCR, Health - WHO, Water and Sanitation - UNICEF, Nutrition and Feeding - UNICEF, Camp Coordination and Management - UNHCR, Shelter - UNHCR, Logistics - WFP, Telecommunications – OCHA, UNICEF, WFP, Early Recovery - UNDP.</p>	<p>Classification: 1</p> <p>Cluster approach to address this</p>	

2.2 Preparedness and Surge Capacity

Recommendation	Follow up action to be taken	Comments and classifications suggested by Yvette Stevens Chairperson of the IASC HRR Reference Group to the 3 rd November 2005 meet	Key Issues/comments made at the 3 rd November 2005 HRR IASC Reference Group meeting
viii. The IASC should establish a functioning relief stock positioning system, in addition to the present registration, among UN, the Red Cross and Red Crescent Societies, the IOM and the NGOs, governments and other stake holders, aimed at increasing preparedness, reducing costs, increasing access and assuring stock rotation. (Action: IASC)	Establish a relief stock positioning system	Classification: 1 Being addressed by logistics cluster as well as other clusters, where appropriate	
ix. The IASC should take the lead in establishing the clear understanding that organizations must measure their surge capacity according to a consistent and predictable standard. A reporting mechanism should be developed by the IASC Working Group with special attention being paid to the NGO community.		Classification: 3 (i) IASC to address	<ul style="list-style-type: none"> ▪ UNHCR: We can agree to the measurement of the Agencies' surge capacities according to consistent and predictable standards. However, not sure why a reporting mechanism should be established as the establishment of standards should be a one-time thing. The level of surge capacities and other preparedness measures will anyhow be monitored under the cluster mechanism (e.g. stockpiles under logistics cluster).

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x. OCHA should promote the expansion of surge capacities through the progressive establishment of pre-identified modules at national or regional level, building, inter alia, on new initiatives such as the European Union mechanisms and the French Proposal to establish a standing International Humanitarian Force (Action: ERC/OCHA to engage in discussions in order to agree on modalities for cooperation and implementation – immediately)	OCHA to take action	Classification: 3 (ii) Specific recommendations addressed to OCHA. OCHA is already engaged in discussions with EU. OCHA to report to IASC on this.	<ul style="list-style-type: none"> ▪ UNHCR: We support OCHA in following up on EU/Chirac initiatives but this should not rule out single-agency initiatives in this regard. In fact it is vital and part of the ToR of every cluster to establish and strengthen stand-by mechanisms with bi-laterals and other global partners

2.3 Effectiveness of Humanitarian Common Services (HCS) and Pooled Capacities

Recommendation	Follow up action to be taken	Comments and classifications suggested by Yvette Stevens Chairperson of the IASC HRR Reference Group to the 3 rd November 2005 meet	Key Issues/comments made at the 3 rd November 2005 HRR IASC Reference Group meeting
xi. The IASC should accelerate the development of common services. (Action: IASC to identify priority sectors before end 2005; design implementation modalities before end 2006)	Identify priority sectors for common services	Classification: 1 This recommendation now needs to be seen within the context of the cluster approach	<ul style="list-style-type: none"> ▪ IFRC: No need for additional action to implement this recommendation. ▪ UNICEF and WFP: Agree. Clusters as well as the UNJLC and HIC deal sufficiently with common services

Recommendation	Follow up action to be taken	Comments and classifications suggested by Yvette Stevens Chairperson of the IASC HRR Reference Group to the 3 rd November 2005 meet	Key Issues/comments made at the 3 rd November 2005 HRR IASC Reference Group meeting
xii. Organization Field Directors should clear and establish agreements with operational partners on matters pertaining to local hiring and procurement in particular. (Action: All)	Addressed to each organization	Classification: 2 Refer to IASC TF on strengthening national and regional capacities	<ul style="list-style-type: none"> ▪ IASC to address the issue
xiii. Non-UN networks, such as those organized by IFRC and the Interagency Working Group, should make liaison with the HC a priority. (Action: Red Cross/Red Crescent members; NGOs)	Action by non-UN actors	Classification: 1 and 2 Ongoing. Could be monitored through the level of participation in clusters at the field level.	<ul style="list-style-type: none"> ▪ IFRC: HC should also attempt to make liaison with the non UN as a priority! ▪ ICVA: The issue should be addressed in the context of the debate on the IASC Country Team. ▪ It was also unclear why this recommendation was part of the HCS section.
xiv. The ERC should consult with the IASC Principals and major stakeholders to agree on designating operational accountability for the various sectors and crosscutting areas to respond to the protection and care of IDPs. A similar approach should be followed in order to designate lead organizations in sectors where this is missing and would seem appropriate. (Action: ERC/IASC - immediately)		Classification: 1 Being addressed through the cluster approach	

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<p>xv. In an integrated mission with significant humanitarian component, the DSRSG should be vested with the authority to make major decisions on humanitarian matters as well as delegated the functions of the Designated Official (DO) for security for the mission. (Action: ERC/IASC - immediately)</p>	<p>Advocacy by IASC</p>	<p>Classification: 2</p> <p>Recommendation can only be addressed through inputs in the design of integrated missions.</p>	<ul style="list-style-type: none"> ▪ ICVA: More clarity is needed for the process involving non UN agencies on the discussion on Integrated Missions. ▪ OCHA (M. Bowden) to follow up to this in the IASC WG in November. ▪ UNICEF: The issue of authority of DSRSG needs to be dealt with sensitivity. ▪ UNHCR: DO functions to DSRSG. The DSRSG/HC may have significant 'security'/DO responsibilities insofar as humanitarian agencies goes but the DO is responsible for ALL UN staff in the area, including DPKO staff. The DO is also responsible to the SG via the USG DSS under the accountability framework, thereby effectively making the DSRSG/HC accountable to two structures - humanitarian and political. Given this broad responsibility, the DO should always be the SRSG. Very often this role is delegated to / managed by the DSRSG/HC. The real issue should be the training of SMT members (it is unlikely that a properly run SMT will see Agency Heads at odds with the DO as the DO will almost always follow the advice/requests from the Agency Heads).

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<p>xvi. The IASC and country teams should accelerate the establishment of the IASC at the country level, to be named the Field Humanitarian Team (FHT). (Action: IASC - immediately)</p>	<p>Note to be sent to Humanitarian Coordinators</p>	<p>Classification: 3 (i) IASC members should agree on this recommendation</p>	<ul style="list-style-type: none"> ▪ ICVA: The IASC Implementation Plan stemming from the External Review of the IASC addressed this issue. There is a need to revisit the implementation plan. ▪ UNHCR: Field Humanitarian Team - of course we have advocated for greater inclusion of all partners at the decision level in the field and this type of forum is necessary (and we pioneered it in Aceh). However, we should still advocate for a coordinated UN position and I believe this will have to be reached through the UN country team.
<p>xvii. The ERC should review the composition, functions and decision-making process of the IASC based on the following elements: i) memberships to be based on substantive involvement in humanitarian operations; ii) major leadership to be ensured in monitoring and promoting the reform process through cross-fertilization amongst organizations; iii) organizations to agree on an appropriate system of empowerment of the IASC in making its decisions binding for the members in pre-identified situations (Action: ERC with IASC for proposals before end 2005)</p>		<p>Classification: 3(ii) These recommendations relate to reform of the IASC. To be referred to ERC for consideration as well as to the IASC Principals.</p>	<ul style="list-style-type: none"> ▪ IASC Secretariat: Several agencies have showed interest in becoming members of the IASC and there is a need to examine the IASC membership in broad terms. ▪ UNHCR: “Agreeing on an appropriate system of empowerment of the IASC in making its decisions binding for the members in pre-identified situations” as well as “referring to the Principals” are good ideas but more discussion needed on what will be proposed.

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<p>xviii. The IASC should establish a joint consultative UN/NGOs/ICRC/IFRC forum at the level of Directors of Emergencies, which should meet at least every quarter or as the need arises, with a rotating chair, to take common orientations on urgent humanitarian issues, using as a basis for discussion the “Early Warning Mechanism” being developed by the IASC. (Action: IASC before end 2005)</p>		<p>Classification: 3(i) Could be discussed in the context of action on the EW/EA report</p>	<ul style="list-style-type: none"> ▪ UNICEF: Maybe the directors’ forum could address other issues such as the ones that are now standing item on the IASC WG agenda (i.e. such as CAP). ▪ WHO: Agreed with UNICEF, the standing item of IDPs should be broadened. ▪ IASC Secretariat: These points should be conveyed in the feedback to the IASC Work Plan 2006, currently being drafted. ▪ UNHCR: Quarterly meetings - to the extent that it does not already exist we should also agree with this proposal. Within UNHCR we would have to agree on the level of participation (there could be several levels of such meetings, e.g. Directors of Operations, Directors, Heads of Services/Sections, Functional Units (e.g. HR)).
<p>xix. The IASC should review the roles of the ERC and Humanitarian Coordinators and make recommendations to strengthen them in order to better reflect the broader basis of the humanitarian community they serve in their coordination functions (Action: ERC/IASC – immediately)</p>	<p>Strengthen HC system</p>	<p>Classification: 2 Work in progress in terms of HC. Role of ERC?</p>	<ul style="list-style-type: none"> ▪ ICVA: More inclusive discussion is needed to address the issue of HC Coordination since not aware of consultation taking place after the IASC WG in September on this issue.

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xx. The IASC should review the selection, training and management system for the Humanitarian Coordinators as well as develop a career path for this cadre, including the establishment of a pre-selected roster of candidates, coming from the different networks part of the IASC.	Review HC selection, training and management system	Classification: 2 Work in progress. Briefing at IASC WG meeting in November. See discussion from IASC WG Retreat	
xxi. The IASC should establish criteria (such as independence from any agency, neutral position vis-a-vis host government, strong humanitarian experience, a mix of operational and diplomatic skills) which the Resident Coordinator would need to meet to be selected as a Humanitarian Coordinator. In cases in which the Resident Coordinators do not meet these criteria, the system should consider a stand-alone HC. A stand-alone HC to be appointed also in case of failed states, uncommitted governments with no degree of accountability and obligations to their citizens and countries at the height of emergencies/disasters without any development opportunities. (Action: ERC/IASC – immediately)	Establish selection criteria for HCs	Classification: 2 Work in progress	

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xxii. OCHA should assess the coordination capacities of the HC offices in the field, in preparedness, planning, needs assessment and resource mobilization and to draw up a time-bound plan of action for equipping them with the necessary tools and mechanisms. (Action: OCHA with IASC)	Assess the coordination capacities of the HC offices in the field	Classification: 3(ii) Action pending if agreed	OCHA for action.
xxiii. IASC should increase coherence in the appeal mechanisms, especially where networks exist. The CAP process should be the tool, with the IASC taking a stronger leadership and establishing by end 2005 a plan of action to speed up the process. (Action: Organizations/IASC)		Classification: 3(i) IASC to take action	
xxiv. Organizations should develop stronger advocacy for forgotten or neglected needs, through a shared “communication” strategy, established through the IASC, addressed in particular to public opinions and media in the current and potential donor countries. Donors’ policy should be challenged on the basis of sound needs assessments. (Action: All/IASC)	Develop advocacy for forgotten or neglected needs	Classification: 3(i) Ongoing. IASC to take action	
xxv. Humanitarian organizations should review their financial systems, with a view to use available funds in a way that anticipates donor disbursements and prevents loss of funds.	By each organization	Classification: 3(i) Ongoing	For Action by each agency-

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xxvi. Humanitarian organizations should identify, in the framework of existing networks or at the level of the IASC, the preparedness activities including recruitment and training that could be part of a common plan to be presented to donors for financial support; exploring in particular the opportunity offered by such an approach in engaging with the private sector. (Action: All/IASC)		Classification: 1 Addressed through cluster approach	
xxvii. Humanitarian organizations should agree to use a common funding appeal system managed by the Humanitarian Coordinator, when as members of a Field Humanitarian Team, they have contributed to establish a Common Action Plan for the initial phase (12 weeks) of a new emergency.	Actions relating to pooled funding	Classification: 3(i) Being piloted in DRC and Sudan	
xxviii. Donors should make substantial progress in addressing the acknowledged imbalance in support to different emergencies (forgotten or neglected needs) (Action: All - through inter alia the GHDI – immediately with clear objectives fixed for 2006 budgetary exercise)	Advocate for equity in support between crisis	Classification: 3(iii) Addressed to donors	<ul style="list-style-type: none"> ▪ Generally recommendations addressed to donors will need to be discussed in the IASC WG.

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xxix. Donors should actively support humanitarian organizations efforts in enlarging the donor base (institutional or private), while preserving respect for the established humanitarian law, principles and practices.	Letter from ERC to donors drawing attention to these recommendations	Classification: 3(iii) Addressed to donors	
xxx. Donors should introduce only progressively and after appropriate preparation, new funding mechanisms, such as country pooled funding, to prevent negative effects on the financial capacities of humanitarian organizations. (Action: concerned donors)		Classification: 3(iii) Addressed to donors	
xxxi. Donors should review disbursement procedures in order to reduce the time span between pledging and disbursement to a maximum of six weeks. (Action: All)		Classification: 3(iii) Addressed to donors	
xxxii. In the framework of the GHDI, donors should rapidly agree on the possible simplified reporting approaches (annual reporting of organizations or common format) and establish the common format by end 2005. (Action: donors in the GHDI - for decision before end 2005 and implementation in 2006)		Classification: 3(iii) Addressed to donors	

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xxxiii. Donors should consider an increase of the present level of funding for humanitarian assistance in the framework of the debate on the MDG. (This should be a priority for the GHDI)		Classification: 3(iii) Addressed to donors	
xxxiv. A larger group of donors, including the private sector, should engage in support of preparedness or rapid reaction- through establishing financial mechanisms covering these types of activities at the levels of organizations and, complementary, at central level, such as a revised CERF. Donors should consider devoting at least 5 to 10 per cent of their annual funding to preparedness activities of the organizations.		Classification: 3(iii) Addressed to donors	
xxxv. Donors should agree on the revision of the CERF in order to increase its size (between 350-500 M \$), to enlarge its scope (support to start up and preparedness activities), to modify its modalities (a large grant element) and the role of the ERC in managing it.	A proposal for an upgraded Central Emergency Response Fund, containing a large grant element, has been developed and is being discussed. Agreement is still to be reached as to whether there will be a separate GA Resolution on the upgraded CERF.	Classification: 3(iii) Addressed to donors	

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xxxvi. Donors should engage to channel funding, in the initial (12 weeks) phase of a new emergency, through the common appeal which will support the Field Humanitarian Team' Plan of Action and will be managed by the Humanitarian Coordinator.		Classification: 3(iii) Addressed to donors	

Prepared by OCHA / HRR Reference Group – November 2005