Comparative Study

The Democratic Republic of Congo and The Côte d'Ivoire Appeals

Needs anaylsis,
Project selection,
and Prioritisation in the CAP

IASC
CAP Sub-Working Group

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1.   ABOUT THE STUDY

1.1   PURPOSE

This study was requested by the organisers of the 2008 Montreux Donors Retreat on the CAP and Humanitarian Finance, in order to highlight best practices and challenges.

Needs assessment and analysis has been an often-criticized part of humanitarian response. But equally important is the link between the needs analysis and the CAP's project selection and prioritisation. If this link is not sound, common humanitarian action plans will not address the greatest needs in an organised and strategic way, and the related appeals will not direct resources to the most urgent needs and strategic responses. Moreover, donors may lose confidence in the appeals, may not appropriate as much to cover the crisis as the appeal claims is necessary, and may allocate their funding in a fragmented and individual way that does not systematically support a strategic and prioritised approach.

The purpose of this study therefore is not to contrast and critique various needs assessment and analysis methods per se, but instead to focus on the flow of needs analysis through project selection and project prioritization to formulate an appeal and its constituent parts, in order to identify the institutional processes, the decisions and policies, and the technical tools most likely to result in an appeal that is valid and reliable.

1.2   METHOD

Two CAP countries, Côte d'Ivoire and the Democratic Republic of Congo, are compared and contrasted – a micro-sample which nonetheless encompasses a range of policies and methods as well as institutional environments and capacities, and therefore yield lessons learned that can be extrapolated and best practice that can be replicated.

A team of three persons (Asa Claesson / OCHA-Geneva, Thomas Dehermann-Roy / UNICEF-Dakar, and Ysabel Fougery / OCHA-Geneva) visited both countries in January 2008 and interviewed donors, UN agencies, the Red Cross/Red Crescent movement and NGOs working in these countries. More than 40 persons were met, mainly individually or where relevant in small thematic groups.

2.   DEMOCRATIC REPUBLIC OF CONGO

2.1   DRC HUMANITARIAN ACTION PLAN - INTRODUCTION

In the DRC, the Humanitarian Coordinator decided in August 2005 to change the name of the CAP for 2006 to "Humanitarian Action Plan" (HAP). The main rationale for this change was to counteract a (erroneous) perception of the CAP as necessarily limited to UN activities, and thus to achieve more comprehensive planning for humanitarian action and coverage of needs, and encourage wider participation in the process (specifically by NGOs). The HAP as practiced in the DRC applies CAP principles perhaps better than do most country teams.

The HAP is developed through a participatory process conducted at national and province levels, with the participation of the clusters at both levels and using the humanitarian inter-agency teams (*Comité Provincial Inter-Agence* or CPIA at province level and Humanitarian Advisory Group or HAG at national level) as validating bodies.

The HAP emphasises one primary CAP function: to encompass all humanitarian needs and action in the country. As the HAP has evolved since 2006, it has piloted some interesting innovations to facilitate this function. First, it derives the itemization of the aggregate funding request (as 'projects' do in other CAPs) on a per-district and per-sector basis, without naming

the proposing or implementing agency in advance, and without producing a project summary sheet for each proposed project. Second, as a basis for strategy development, the HAP 2008 introduces a number of predefined triggers for humanitarian action (linked to mortality, morbidity and nutrition rates, protection, IDPs and returnees – thus a combination of overall vulnerability criteria and targeting of particularly vulnerable groups) in an attempt to better define the scope of and limits to humanitarian action – particularly necessary in the DRC where background poverty and extreme under-development cause humanitarian needs similar to those generated by conflict. The five triggers were developed in collaboration with the donors. The triggers shaped the needs analysis process and subsequently formed the basis for the strategic objectives and the cluster-led identification of priority activities and provinces to be included in the HAP. This overall strategic framework is presented through a logical framework approach, detailing the estimated funding requirements by strategic objective; this approach also forms the basis for systematic monitoring. The 2008 HAP's monitoring system combines impact and output indicators, and will be further developed over the course of the year.

The cluster approach was introduced in the DRC in 2006 and there are at present 10 clusters operating at national and provincial levels. There is a relatively large humanitarian presence in the conflict-stricken eastern provinces including clusters operating under the coordination support from OCHA. The more stable central and western provinces also demonstrate significant humanitarian needs totalling 26% of the funding requirements in the HAP. However, in these provinces the humanitarian presence is much weaker and the coordination arrangements are different: sector groups are coordinated by MONUC/Civil Affairs Section, WHO and UNFPA.

Specific to the DRC context is also the centrally-managed funding mechanism the Pooled Fund, which in 2007 handled about 25% of the funding that donors provided towards the HAP. Supported by seven donors (UK, Netherlands, Sweden, Ireland, Norway, Canada and Belgium, in order of size of contribution) it has since its creation in 2006 replaced a large part of direct donor-to-agency funding. Project selection for funding from the Pooled Fund is done through an elaborate process at provincial and national levels, including the Pooled Fund Board, chaired by the Humanitarian Coordinator (also ultimately in charge of decisions) and comprising representatives of donors, UN agencies and NGOs.

2.2   THE HAP – GENERAL OBSERVATIONS

According to donors and most agencies, the HAP 2008 is a significant improvement relative to previous years. It is believed to be well structured and presented as a more coherent framework, more logical and results-oriented. There is further agreement that the quality of the analysis has improved and progress has been made in the identification of indicators. It is seen as a very useful strategic reference document.

However, it is unclear in the document who is currently doing what where, thus which actors are active in which province and sector. Therefore it is difficult to distinguish between a province with high needs where many actors are present and thus with high response capacity, and another province with similar needs but more neglected by humanitarian actors, which might as a consequence merit attention. (This information does exist in the separate "Who does what where" document.)

Donors actively participated in the elaboration of a structure based on objectives and indicators, and in a narrower selection of activities to be included; this resulted in a strengthened definition of emergency activities versus development. A number of donors and agencies still consider that the HAP contains too many activities that are development (or perhaps recovery) rather than humanitarian. It is a challenge in the DRC context to distinguish what is humanitarian and what is lack of development and neglect – as the underdevelopment is near ubiquitous and not limited to the areas experiencing conflict. The complexity of the situation poses significant challenges as there are humanitarian, transition

and development activities taking place simultaneously, and some donors are engaged in all these phases at the same time (appropriately enough in the context).

Taking all this into consideration, it was seen as a priority, as well as an explicit donor demand, to clearly define the limits of humanitarian action to enable a more focused response, supported by transparent criteria, while at the same time keeping the strategy as flexible as possible to allow for easy adjustments given the fact that the situation is extremely changeable and unpredictable. The inclusion of five triggers with specific indicators for the activation of humanitarian action is seen as a major success in this regard, providing clarity to the process and document. Although the humanitarian problems experienced in the western and central provinces are more due to a developmental crisis, it is on the basis of these objective, non-contestable triggers that the western provinces were included in the document. The system therefore resolves the ultimately philosophical question as to whether acute needs are humanitarian or developmental by arguing that acute humanitarian needs must be met irrespective of whether they are directly or secondarily caused by conflict, or by developmental neglect.

While the improvements in the HAP are generally recognized, the majority of humanitarian actors do not specifically refer to it in their programme planning. Instead, it is seen as sufficiently broad to cover all their programmes by default. It is not really seen as a fundraising tool for agencies or for NGOs. Some donors feed the HAP into their decision-making; others have their own mechanisms to make decisions and will only regard it as a confirmation of information obtained through other means, such as their own presence in the field, or reports from implementing partners.

Furthermore, insufficient information on 2007 achievements relative to goals is available in the document; what is presented is mainly activities accomplished.

The format is seen as user-friendly – in particular, the thematic maps and graphs are appreciated.

2.3   INCLUSIVENESS

There is generally a stronger involvement by the humanitarian actors in the HAP processes than before and the quality of the participation has improved. The HAP process is seen as a platform for coordination, exchange and communication, which is useful to mobilize all actors.

As the budget is based on planned activities and endeavours to encompass all humanitarian action in its strategy and response plan, the activities of all agencies and NGOs working in DRC within the field identified in the strategy are de facto included. Therefore, by referring to activities and priorities rather than actors, the plan avoids the issue of organizations being reluctant to have their name appear in a consolidated appeal, or conversely, putting as much of their country programme fundraising needs as possible into the HAP.

Donors: Donors tend to be satisfied with their access to and involvement in the process; however agencies would like to see them more actively involved at cluster level.

NGOs: Most NGOs tend to see the process as still very UN-driven. They feel that the NGO inputs should be taken more into account, as they are the ones with field presence; and realize that they might need to better coordinate among themselves to ensure their visibility. While their participation at cluster level is systematic, they are less present during inter-cluster discussions as they decided to economize staff time by nominating three NGOs to represent all.

Government: The Government participates in the priority-setting for the HAP at provincial level and at the HAP workshop at national level, thus there are ways for them to feed their input into the process.

MONUC/Civil Affairs Section: They participate in the HAP workshop at national level; otherwise their involvement is limited to the western and central provinces where the Civil Affairs Section fulfils a coordination role in the absence of OCHA and/or other capable and willing agencies. MONUC also participates through CIMIC and Human Rights Sections.

2.4   PROCESS

The preparation of the HAP is generally considered to be well done with more guidelines available than before. In the western and central parts of the country, OCHA teams were temporarily deployed to support in the MONUC/WHO/UNFPA-coordinated provinces – this support was considered valuable.   OCHA's facilitation role was emphasized by a vast majority, many mentioning considerable improvement over the previous years.

One of the major flaws in the process was discrepancies between clusters and provinces in term of figures, standards, indicators and budgets to apply. As a result, there was a lot of work at the Kinshasa level to ensure consistency between provinces, and between clusters. In addition, some actors found it difficult to comply with instructions given. Some actors felt that the timeline was unclear, deadlines were too tight, and NGOs in general found that the process was time-consuming, unclear, and that due to their limited capacities they could not be involved as much as they wanted.

2.5   NEEDS ANALYSIS

There was no global needs analysis exercise such as the NAF carried out in preparation of the HAP 2008. Instead, data on needs reported in the document are collected from a range of sources, and compiled at the cluster level. For several reasons global assessments are difficult to put in place, and the NAF as used in DRC 2005 was found too static and cumbersome, as it led to an ambitious needs analysis project which experienced major difficulties with regards to lack of data, logistics and overall cost. The value of repeating such a major investment is questioned as the collected information quickly becomes out of date due to the rapidly shifting and highly unpredictable situation in particular with regards to the conflict in the East of the country. It is therefore considered key to design a system of needs analysis that allows for flexible adjustments and that finds a way to mitigate the obstacles to accurate and global data collection. It is likely that the NAF, if seen as a data collection and analysis tool only, could be adapted to the situation.

Although the clusters generally have good knowledge of the crisis zones in the country, there is no systematic and global data collection system or analysis done. Approximately half of the territories are included in the need assessments and analysis that are the basis for the HAP. There have been cases where zones with on-going humanitarian issues have been "discovered", particularly in the provinces with weak humanitarian presence and thus weak reporting mechanisms towards the centre.   The size of the country is an important complicating factor making it difficult for the humanitarian community to have accurate and updated information from the whole country at all times.

The lack of governmental statistics is further a major weakness with regards to the availability of core data to feed into the HAP. Decades of neglect and collapse of basic state functions has resulted in poor information collection systems in most areas. Collection of health statistics is slightly stronger than in other sectors, in particular with regards to epidemiological data. The reliability of Government data that exists is often under question which affects its usefulness for the HAP. When data and systems for its collection do exist, figures are often out of date (e.g. from the statistics office in the field of food security).   The health cluster

emphasizes that more should be done to work with the government on data collection, as humanitarians depend on this information for effective planning. This is largely a capacity-building issue that cannot be fixed quickly and has not had donor attention so far.

To mitigate the obstacles to accurate data collection outlined above, the process focused on collecting information related to the five humanitarian triggers which are at the base of the strategy. These are thus what guided and defined the data collection. For each of the triggers, an agency (cluster lead) has been charged with the compilation of the data needed to be able to ensure effective monitoring of the indicators (e.g. malnutrition rate over 10%, or population displacement) and thus be able to alert when the thresholds have been reached. Lack of data necessitated the identification of proxy indicators in some cases.

Major in-country data collection mechanisms are the Rapid Response Mechanism[1] (RRM) and the Programme of Expanded Assistance to Returns[2] (PEAR), information which is also fed into the global strategies. The RRM carries out inter-agency rapid assessments as rapid-onset crises occur in the Eastern provinces. The PEAR is instrumental in the collection multi-sectoral data in return zones and with regards to returning populations.

There are significant on-going initiatives in most of the clusters to strengthen systems for data collection for needs analysis to enhance coverage and accuracy. It seems indisputable that the cluster approach has helped in this respect. For example, a major data collection initiative within the food security cluster is the IPC (Integrated Phase Classification, originally developed in Somalia) which aims to reinforce evaluation and mapping of needs.

Recommendation:
♦   Funding of medium-term strategies to get better baseline data is necessary.

2.6   RESPONSE PLAN AND USE OF INDICATORS / MONITORING

During the preparation of the HAP, the overall humanitarian triggers/thresholds for the activation of humanitarian response were defined at the national level. Based on these, the clusters at national and provincial level then developed specific objectives identified the activities envisaged for appropriate response and detailed indicators to measure the response. For each activity, there is also an estimation of the size of the targeted population by province.

2.7   PROJECT SELECTION

As mentioned above, the HAP contains budget requirements specified by activity and province but no specific organization; hence in local parlance they are not called proposed 'projects.' The elaboration of budget requirements has been preceded by an analysis

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[1] The RRM is the largest mechanism responding rapidly to acute and life-threatening crises. Funds are channelled through OCHA and through UNICEF (for operational costs, supplies, logistics, and security materials) to pre-position stocks of relief items and provide operational partners (focal points) with quick deployment capacity. A contingency fund is reserved to allow other partners to engage in interventions beyond the capacity of the focal point. Benefiting an estimated 130,000+ internally displaced families in 2006, key activities include: assessment of humanitarian needs resulting from acute, rapid-onset crises within 48 hours of identification; response to needs of eligible beneficiaries in shelter and non-food items, water and sanitation, emergency education and primary health care; coordination of assessment and response; monitoring of utilization of supplies and/or services delivered; and evaluation of impact of interventions.

[2] Implemented in collaboration with all key UN agencies and partner NGOs, PEAR is expected to benefit some 100,000 internally displaced returnee families in eastern and southern DRC through support to reintegration and recovery in UNICEF cluster lead sectors, as well as in sectors in which UNICEF has a substantial role (health, community participation and mobilization, HIV/AIDS, etc.). Activities include: provide timely and accurate information to potential returnees on conditions in villages of origin; undertake detailed multisectoral assessments in identified key return zones; respond in key UNICEF sectors and advocate for needs in other sectors to be addressed; store, distribute and monitor end-use of items provided to eligible return families; contribute to sectoral coordination through cluster leadership approach. As cluster lead for non-food items/emergency shelter, UNICEF will retain stand-by capacity to provide emergency family relief kits and clothes to a further 15,000 returnee families outside the PEAR framework.

exercise in each cluster (at provincial and national levels) of envisaged projects needed in order to achieve the predefined objective. The exercise also includes the identification of the concerned organizations, taking into consideration the varying operating costs between agencies. Thus, the budget requirement is in principle a compilation of foreseen projects by the actors operating in the field. However, in the actual document there is no mention of division by project or specification of implementing actors.

It is important to note that the figures are not exact but rather broad estimates based on available knowledge - the most likely scenario as developed in the HAP - at the time of production of the document. The advantage of this approach is believed to be the degree of flexibility of the plan and the fact that the figure reflects in principle the totality of humanitarian activities. As a result there is no such thing as 'inside or outside' of the HAP, a dichotomy often resulting in painful discussion in other CAPs.

On the other hand, the weakness of the process of budgeting by activity is its lack of precision. While recognizing that HAP budgets will always be subject to revision as the humanitarian reality evolves, it is important to arrive at an estimate as accurate as possible, especially because the relative proportions identified in the HAP are the basis for funding decisions (Pooled Fund but also bilateral funding). There were significant differences in methods used in the different provinces due to differing interpretation of guidelines and indicators to use, indicating a lack of standardization of process and criteria.

Replicable best practice and lessons learned
♦ If a country team decides to use the DRC method of appeal budgeting, it is important to ensure more standardization of the budgeting process, in the interest of ensuring the credibility of the process, and because the budget requirements identified in the HAP are the basis for funding decisions. This should be done through strengthening guidelines and criteria communicated from the national level (OCHA, cluster leads) as well as direct facilitation support.
♦ It is fundamental to ensure significant support from the cluster leads in the budget elaboration process to ensure standardization between provinces.
♦ In the interest of transparency and credibility, it would be advisable to include a breakdown by agency budget. This would also facilitate fundraising, and the visibility would also provide an incentive for participation in the HAP processes.

2.8   POOLED FUND PROJECT SELECTION

The procedures for project selection and prioritization for funding under the framework of the Pooled Fund (PF) have varied since its inception in 2006, giving differing degrees of centrally established criteria to guide the identification processes in the provinces. (The PF has been the subject of a previous evaluation, and another one currently.) There has also been shifting policy with regards to the division of funds between UN agencies and NGOs. Over the course of 2007, the PF supported a total of 208 projects, and thus handled about 25% of donor funding for the HAP.

For 2008, the country team plans a new approach to respond to demands to make the allocations more transparent and predictable in terms of strategy. The basic principle behind the proposed approach with regards to projects at province level is a division of funds in accordance with percentages by province and sector as defined in the HAP, using the priorities and the relative proportions identified in the HAP as a direct base for its funding decisions and by doing so ensuring the very close link between the two. In addition to supporting provincial projects, the PF systematically sets aside funds as a reserve for sudden-onset crises (mostly but not entirely going to the Rapid Response Mechanism or RRM), and the running costs of the PF. Along with the provincial allocations, there is also a proportion given to UN projects with country-wide coverage (like logistics); this part of the allocation process is managed centrally.

With regards to the provincial allocations – which are the more controversial part – it is the role of each cluster lead to work with its partners in the provinces to come up with a list of priority projects based on the funds communicated as available. The amounts identified at national level are, however, approximate and subject to revision as needs change over the course of the year. It is also the role of the cluster leads to ensure that the HAP strategy is strictly adhered to and the most urgent needs are indeed those identified.

Certain donors channel practically all their humanitarian funding through the Pooled Fund, while others continue to commit funds directly to organizations as before. It is believed by donors who contribute to the PF that it facilitates their work and is a way to ensure that funding is directly linked to the priorities in the HAP and reviewed in accordance with the most urgent needs. But donors must still coordinate amongst themselves: since 75% of HAP funding is still direct from donor to organization, overall funding will never be balanced among sectors if donors do not act to reduce discrepancies by mutually balancing their decisions.[3] The PF may provide a forum for such broader donor coordination. For example, donors could use the analysis preceding a Pooled Fund allocation as a basis for their own direct funding decisions as well (although this currently does not seem to be done to any significant degree).

The role of cluster leads in the Pooled Fund project selection and prioritization processes – as they are both in charge of reviewing their partners' projects and submitting their own – is inherently complicated and has been a source of tension within the clusters and CPIA. The humanitarian community is divided on this issue. While an involvement of the clusters in the project selection processes seems necessary due to their sector expertise and thus ability to give recommendations as to the technical aspects of the project including its feasibility, there is wide reluctance for them to be involved in the decision-making itself. There are thus two aspects of the prioritization process; one that is technical and thus less disputable, and one that is strategic and by its nature more controversial and a question of judgment. There are also calls for the Pooled Unit to take on a stronger role in the review of projects and monitoring, which is considered to be a weak link in the process.

Although procedures are considered to have become more efficient, and the drawn-out processes of negotiation seen in the earlier stages have been somewhat reduced, the allocation processes at province and national levels are still highly time-consuming for cluster leads and members at provincial and national levels. This puts a particular strain on NGOs with a small number of staff. The PF allocation processes also demands a different set of skills not traditionally required of operations staff, as they become involved in fundraising and advocacy for particular projects. Advancing your project for PF funding requires a level of preparation that also adds to the workload.

There is a sentiment amongst NGOs that the HAP and PF processes are controlled by the UN agencies. NGOs also express some concerns that their ability to propose innovative approaches in project design has been limited, as they have to adapt their projects to the consensus of the group. There are further some concerns that the technical review done by projects prior to receiving Pooled Fund financing duplicates similar reviews already undertaken by agency HQs. While recognizing the need to ensure that review procedures are standardized this might be seen as adding an additional layer of bureaucracy.

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[3] Discrepancies in funding among sectors, as a percentage of requirements, have reduced somewhat since the advent of the PF. The standard deviation of the sector funding percentages in the 2007 HAP was 22.6, continuing a steady decline since 2004 (2006: 26.0; 2005: 33.1; 2004: 40.6). (Perfect parity among sectors would produce a standard deviation of zero.) However, there is a long way to go to achieve parity: even in 2007, funding ranged from a high of 77% for food to lows of 0% for agriculture, 10% for education, and 20% for water-sanitation.

2.9   PRIORITISATION

The country team has created a geographical prioritization system that, with the five triggers, allows to easily identify priority geographical areas (see Annex V). This system is certainly one of the major achievements of the team. The country team has compiled needs assessment information for all districts of concern and ranked the districts according to severity of needs. (Because of the diffuse nature of humanitarian needs in DRC, not limited to specific groups like refugees or IDPs, the geographical approach may be the most logical.) The ranking uses six main variables: number of IDPs, number of returnees, protection, sexual and gender-based violence, malnutrition, and health (the latter four being represented by bundles of indicators). This prioritization is then reflected (albeit not perfectly) in the itemized funding requests per district and sector. A similar system called Integrated Phase Classification or IPC has been used in Somalia (though that is more focused on food security).

Recommendation
♦   The prioritization system "*à la* DRC" should be replicated in other CAPs.

2.10   PROJECT SHEET OR NOT?

In general, there is good ownership in the DRC of the "project-less" approach.[4] It is widely believed to have made the process more strategic (by linking funding requests more directly with assessed needs and priorities, and less with agencies' own fundraising targets), and most donors mentioned that they did not wish to return to the project sheets. Agencies think that not having project sheets allows the document to present general directions without being too rigid, and enhances flexibility. Some actors also mentioned that project sheets tend to collectively become "shopping lists", reducing the credibility of the document and increasing agency competition as each agency tries to sell their own projects. In addition, as emphasized by many, a main benefit of this approach is the reduced paperwork.

However, it is significant to note that the fact that there are no projects or reference to implementing partners in the document makes accurate financial tracking difficult, thus reducing the scope for analysis and follow-up.[5]

Some actors found the project-less approach inappropriate, as it does not allow them to know how much each actor is appealing for. Neither does it give the donors an indication as to the proportions between the funding requirements of the different organizations. NGOs in particular found that it reduces their visibility. The absence of project sheets might also have as a consequence that some actors stray from the agreed action plan, as their agency is not bound to certain activities.

Without the project sheets, donors who want to fund directly, and who do not have relationships already established with implementing organisations, must first pass through the cluster lead or the provincial CPIA to obtain information about which agency operates in which field. This is naturally more difficult for donors who do not have a presence in-country, and indeed for potential new donors. There is thus a risk for an unintentional disconnect between the HAP and funding provided, as it becomes less straightforward to ensure the coherence.

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[4] This is something of a misnomer, as the itemised funding needs per sector and district are equivalent to projects; it is only the proposing agency's name that is not specified. It is truer to say that the HAP is 'project sheet-less.' CAPs usually present projects in one-page summary form. In DRC, the country team decided to omit the summary sheets because organisations found them burdensome to prepare, even in their one-page form, especially considering that a large majority of DRC projects are never funded, and hence the effort of writing and publishing project sheets is wasted. The Pooled Fund requires recipient agencies to complete a project sheet only after the grant has been decided; and of course donors require full proposals according to their own standards. HAP projects, at the time of HAP publication, are therefore 'proposing agency-less' and 'project sheet-less.'

[5] To explain, the DRC method expresses funding needs per sector and district. If funds are not allocated (or reported) to the same level of detail, then it is impossible to identify the gaps among sectors and districts.

Some agencies who tend to have similar projects year after year thought that the project sheet were not much of a burden. Several actors also mentioned that as they have to write project sheets for the pooled fund application, the project-less approach only delays the moment when they write the sheets.

Replicable best practice and lessons learned
♦ While full project sheets seem inappropriate in a situation as large-scale and fluid as DRC, it is still important to have minimum information on who plans to do what where, to help donors find implementers, ensure that each actor can have a "price tag" on their activities, and make it possible to track funding gaps per sector and district. Simplified on-line project sheets easily updatable in electronic format, seems a good compromise.

2.11   MONITORING

The specific structure of the 2008 HAP aims at improving the global humanitarian response in DRC by responding more rapidly with more efficiency in a coordinated manner to the population's needs. The HAP, the cluster approach, and the Pooled Fund all support each other in achieving the DRC humanitarian objectives.

The development of a stronger system for effective monitoring and evaluation has been identified as a priority in order to increase the accountability of the HAP. It is also in all its complexity a major challenge for the humanitarian actors (in particular clusters leads and OCHA) to measure the impact of the humanitarian community against the HAP objectives.

An effort has been made to make the indicators used in 2008 more measurable. However a number of them might need further refinement. The HAP presents a monitoring scheme based on a mixture of impact indicators (linked to the key trigger indicators for the identification of a humanitarian situation) and output indicators (which report the specific activities by each cluster).

The question of additional capacity required for the accomplishment of such a monitoring scheme has been addressed at several occasions by the clusters that will have a major role to play in undertaking this task. This capacity issue clearly is a constraint faced by the clusters at field and national level: lack of capacity would jeopardize the quality of the monitoring or hamper the quality of the programmes of each organization. Although efforts have been made to limit the impact indicators to few and measurable variables, the overall impact monitoring is likely to pose certain problems and given the constraints some organization would find it more feasible to limit monitoring to outputs.

Replicable best practice and lessons learned:
♦ In order to give a kind of baseline or help to see improvements from one year to another, country teams should give more importance to the follow-up and mapping of interventions and results accomplished during the implementation phase (to be presented in CAP and MYR documents). (Tools are available for this.)

2.12   COORDINATION

After a starting up phase characterized by an at times painful shift of working culture and numerous adjustments, the cluster approach has settled in the DRC, and is no longer contested. There is wide recognition of the benefits with regards to the HAP process that the cluster system has brought about in terms of improved analysis and planning. The strengthened sense of ownership of the process by the clusters and accountability of the cluster leads are cited as key factors in this regard.

The work demanded by the clusters in relation to the HAP in terms of analysis, planning and monitoring demands significant resources. Some difficulties and delays are reported – in donor funding for cluster activities and the allocation of in-country resources by agency HQs – making it difficult for some of the clusters to fulfil all their functions.

There are varying opinions as to whether cluster coordination should be a stand-alone function or be combined with agency responsibilities. While there is recognition that cluster coordination in most cases is a full-time job and it is inherently difficult to combine loyalties and accountability to the cluster with that to the agency, others see advantages in keeping in touch with the operational realities. There are also varying opinions with regards to the usefulness of cluster co-leadership. While it risks diffusing responsibilities, it is recognized that NGOs co-leadership encourages overall NGO participation in the process, but presents issues of resources to take on this task.

It is difficult for NGOs with limited staff to ensure participation in all the different components of the HAP. This creates frustration, in particular in relation to PF allocations. **The chance of accessing PF funds is cited by some as the main reason for participation in the work of the clusters, while others express a stronger commitment to coordination in general.** Further, the fact that eligibility for PF funding requires a sometimes very time-consuming participation in the process is by some seen as creating a degree of dependence on the UN system. The decentralized nature of the HAP process also increases significantly the work burden of field staff, many of who are relatively young and inexperienced. Some agencies have deployed more senior staff to field locations but there are also indications that there is insufficient support and training with regards to cluster facilitation and the role of clusters in the HAP process. High turnover of staff also means that this need is on-going.

Due to its diverse nature, the NGO community has not fully developed its potential in terms of organizing itself internally in order to rationalize time spent in meetings and agree on common positions to strengthen their strategic input. A positive development is the deployment of a Humanitarian Reform Coordinator to be based in Kinshasa, as a representative of a number of NGOs in cluster, PF and the HAP process.

Replicable best practice and lessons learned
- Practical (non-theoretical) guidelines in relation to the role of the cluster in the CAP process to be made available to staff at all levels.
- It is essential to ensure effective collaboration among NGOs so that their demands and viewpoints can be effectively fed into the process, with economies of scale and so without exhausting the capacity of individual organizations.

2.13   DONORS AND GHD

Most donors feel sufficiently involved in the HAP, directly and/or through the pooled fund process. Donor participation in the HAP processes is in most cases limited to the HAP workshop and weekly HAG meetings. (It is however believed by some that the latter is more for information-sharing and less of a forum for strategic dialogue.) There is also some donor participation at the inter-cluster level.

Some donors use the analysis made in the appeal is used as the basis for funding decisions. However, several donors mentioned that the HAP does not influence their decisions - which they rather make based on their own assessment of the situation - although they will consult it. For example, ECHO is present in several field locations (Goma, Bukavu, Katanga), and participates in the coordination process in place. It was pointed out that the HAP might be useful as an advocacy tool to call for increased levels of funding from their own their own HQ. The HAP might be more useful for those without presence in-country. For ECHO and USAID, the HAP is unbounded enough to cover all the activities they finance, thus there is no issue of 'inside vs. outside' HAP funding. ECHO no longer insists that projects they fund be counted in

the HAP (as they did in 2006), but by default this is most often the case. For USAID, reference to the HAP might be seen as an advantage when considering projects for funding.

There is a GHD group in Kinshasa that meets on a regular basis. Formal monthly meetings under the auspices of the Humanitarian Coordinator take place, as well as other less formalized meetings. These fora provide a platform for donors to coordinate their response and to avoid duplication and gaps; however the potential for strategic discussions is not utilized to the extent that some donors would like to see. There is also some "bypassing" in the sense of donors funding partners directly without informing the clusters, which complicates coordination and financial tracking.

Agencies would appreciate more donor involvement in the HAP process, particularly at the cluster level. It is felt that there is not enough donor participation in the different stages including analysis of needs and the elaboration of strategy. Agencies tend to feel that OCHA acts as a "filter" between donors and clusters, especially for donors who fund via the pooled fund. Cluster leads feel that with regards to the pooled fund, they are to an extent doing what was previously the donors' job of selecting projects to be funded (the same applies to an extent to direct funding as donors consult cluster leads on sector priorities) yet they do not have access to additional resources required to take on this task.

Replicable best practice and lessons learned
♦ More donor involvement in the different components of the CAP process and in the cluster activities would allow for a closer engagement and contribution to strategy. Moreover, donors should give specific feedback and critiques after the appeal is launched, so that weak parts are revised or deleted early in the year, without waiting for the mid-year review.
♦ Ensure the continuation and strengthening of fora for strategic dialogue among donors (not limited to the Pooled Fund) to ensure coherent planning of funding allocations.
♦ Donors and cluster leads should regularly provide reports to OCHA on their funding situation. Operational agencies should channel this information via the respective cluster leads. Systems for this should be standardized so that information is conveyed on time and comprehensively to FTS. Appropriate resources (and training) for this should be developed including a designated OCHA staff in-country.
♦ Ensure that appropriate resources are allocated to carry out the task of cluster lead.

3. CÔTE D'IVOIRE

3.1 INTRODUCTION

The strategy adopted for the CAP 2008 stems largely from the 2007 CAP Mid-Year Review process. The CAP 2007 had come under significant donor criticism for budget requirements that were considered too high and activities not enough prioritized and focused on humanitarian needs. There was a degree of confusion as to the scope of the humanitarian strategy, as it comprised a mix of emergency and recovery programmes.

The pressure from donors and difficulties in attracting funds for the CAP programmes (27% funded at mid-2007, one of the lowest) pushed the humanitarian community to change the strategy, under the leadership of the HC and with support from the OCHA office. In the 2007 MYR and the 2008 CAP, strategies became based on a narrower definition of humanitarian needs, cutting the budget from $56 million[6] to $30 million (excluding a $13 million WFP food component that was moved from the West Africa Regional Appeal into the Côte d'Ivoire appeal at that moment). This reduction was natural after the signing of the peace agreement but also responded to the donor complaints of lack of clear humanitarian vision. This re-orientation of the CAP rebuilt trust with donors.

The new humanitarian strategy introduced a geographical and status-based focus: IDPs and returnees in the return zones in the West. The focus was intended to deal with the fact that the crisis had paralysed social services in much of the country, causing widespread moderate humanitarian need, yet donors were clearly not in a position to fund emergency provision of basic services across the board. Such a geographical focus, if overly rigid, of course risks neglecting humanitarian needs in other areas, such as the North, which may also be related to the crisis but not stemming from displacement. In fact, some humanitarian indicators (e.g. malnutrition 13%) are worse in the North than in the West, and for this reason the focus established by the HC also included proven acute needs away from the West.

One important component of this process was to identify alternative funding mechanisms for early recovery and development programmes, proposed by many actors. Indeed, one of the main achievements of the 2008 CAP is considered to be the complementarity between humanitarian and development programmes and efforts of agencies to develop strategies and programmes in the two different fields. To complete this process, as Côte d'Ivoire moves towards increased stability and transition, the country team will have to identify and develop an appropriate exit strategy for humanitarian programmes and ensuring handover to development actors.

The CAP 2008 process started with the CAP workshop held in September 2007 in Abidjan, where strategic priorities were discussed. These were then transformed into sectoral priorities, on the basis of which projects were presented by Agencies and NGOs for vetting by the sectoral groups. (In Côte d'Ivoire, only the Protection group calls itself a cluster and has formally invoked the cluster approach; however little difference is seen between its performance and that of the sectoral coordination groups). The Inter-Agency Humanitarian Coordination Committee (IAHCC) then provided a cross-sectoral validation, before the document was signed off by the HC. The CAP methodology and presentation used in Côte d'Ivoire is conventional in the sense that it includes a CHAP and a list of project sheets.

3.2 SELECTION OF OVERALL PRIORITIES

The HC played an essential role in guiding the process. He made the decision to focus the CAP in the return zones in the West of the country, thus reducing actions planned in response to the general paralysis of basic social services across much of the country, which caused humanitarian needs but were perceived by some as a developmental or recovery question.

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[6] All dollar signs in this document denote United States dollars.

The new approach used a geographical criterion as well as identification of the target group of beneficiaries based on IDP or returnee status. This targeting was largely maintained for the CAP 2008. However, it should be noted that in the return zones, host communities are also included as beneficiaries, and that some projects have also been included in the North because this area has very poor humanitarian indicators, in particular malnutrition. It is widely believed that the CAP 2008 contains better identification of needs. However, some donors would like to see even better targeting, further excluding activities that are not sufficiently 'humanitarian.'

This story (combined with DRC's) suggests that, in a sense, whether to use the NAF per se or not is less important at the macro CAP level than the HC's decisions on overall boundaries for humanitarian action. In DRC, the HC decided to measure key humanitarian indicators vs. thresholds across the country, both to prioritise and to resolve the distinction (felt by many to be spurious) between needs caused by conflict and hence humanitarian vs. needs caused by extreme under-development hence developmental. In CDI, the HC took an opposite decision to focus on displacement and on the West (with the exception of the North, in response to malnutrition rates that justified a trigger). If an HC does not make such macro-level decisions at a suitable point in the process, a NAF or any other tool is not going to help much in defining and prioritizing humanitarian needs.

3.3   THE CAP – GENERAL OBSERVATIONS

The CAP is seen as a reference and advocacy document with a clear, detailed and accurate context analysis. Some believe that a multi-annual strategy should be included. The country team's vision is that the CAP should not really be an operational tool in the sense of a detailed plan specifying who commits to doing what where, but instead mainly used to attract donor funding (both bilateral and CERF). Indeed, the main motivation expressed by agencies for participating in the process is the prospect of attracting funding, and there is a tendency to lose interest if the CAP does not help in this respect. Agencies feel that it can be an added value in their contact with donors to be part of the CAP. Some donors also refer to the document in their contact with their own headquarters and recommend that they fund specific activities within the CAP. The NGOs' views are varied, with some using it as a fundraising tool, and others seeing it as "UN money" only. Some feel that they invest significant time and share a lot of information in preparation of the CAP but that it does not give them an added value or additional funds. Few if any seemed convinced or concerned that the CAP process improved efficiency by applying comparative advantages, or filled uncovered gaps in humanitarian needs. This seeming nonchalance about the humanitarian system's collective responsibility to meet needs, and the CAP's role in fulfilling this responsibility rationally and systematically, is disappointing.

3.4   INCLUSIVENESS

Involvement and commitment varies widely, including among agencies.

Donors: Donors feel that they are sufficiently consulted in the process and have a chance to provide inputs. While they feel that they can influence the direction of the CAP, some choose not to get involved at that level. Despite being invited to sector group meetings and all CAP-related activities (CAP workshop, IAHCC, joint evaluation missions), most participate only to a limited extent, due mainly to capacity constraints. Larger donors tend to feel self-sufficient in strategic information (hence rely less on CAP to provide it) and so participate less in the process, while smaller donors use the CAP to provide recommendations to their capitals on humanitarian priorities. Others prefer to stay neutral to the entire process.

NGOs: There is clearly a divide between NGOs with regards to their inclusion in the CAP. Some think they have been offered space to participate in the process and are actively involved. Others clearly feel that NGOs are generally poorly involved in the process, despite

them being all for sharing of information in the sector groups. These NGOs feel that the CAP is not very useful and has no particular value for them. They see an overall lack of efficiency in the process. Some of them say they receive funding from the EC (not ECHO, which has ceased funding in Cote d'Ivoire) for humanitarian projects in the North.

ICRC: The ICRC participates in the IAHCC; this is their link to the rest of the coordination mechanisms. ICRC shares their own analysis with the rest of the actors in the sectors. However, they do not do joint evaluations, but rather work in parallel. They feel it is good practice that the complementary approaches between the two "systems" (ICRC and UN/NGOs) is made clear by mentioning the ICRC in the CAP.

Government
The Government participates in sector groups and in the CAP workshops and IAHCC. Their role should increase, as the country gets more stable.

Replicable best practice and lessons learned
♦ Involve the Government more, through sectoral groups and the inter-sectoral forum, as the country moves towards transition.

3.5 PROCESS

The HC not only identified the priority area but also indicated an approximate budget ceiling for the CAP 2008, based on a perception of what donors would find acceptable. There is an argument that CAP budgets should not be tailored to anticipated supply, but instead the implementing side of the humanitarian system has a responsibility to present the totality of assessed humanitarian needs to donors, who in turn have a responsibility to fund according to need. On the other hand, imposing a budget ceiling could be seen as one means of prioritizing, or obliging the implementing organizations and sector groups to prioritise.

Donors in CDI did not significantly influence the CAP process or priorities. However, they influence project design and targeting on a project-be-project level, bilaterally with the proposing agency more than with regards to the CAP as such.

3.6 NEEDS ANALYSIS

No formal multi-sector NAF was carried out in preparation for the 2008 CAP, as it was not considered feasible given the very high costs involved. Instead, the needs analysis upon which the CAP is based is a compilation of agency inputs from their respective area of operation (MICS, food security survey, IPC, harvest survey, etc.). The global needs analysis done to prepare for the CAP 2008 still drew upon the consolidated analysis done in 2006 using the NAF methodology. In addition, regular joint field evaluation missions by agencies and donors gave weight to the prioritization of needs (for example those conducted in June and September 2007 and January 2008.) As is often the case in war-time or post-war countries, government statistics are missing in a number of areas, creating some gaps in the data collection that weaken the reliability of the overall analysis. (However epidemiological information, at least. is mostly available throughout the country.

There are disparities in the perception that donors, UN agencies and NGOs have of the quality of the need analysis upon which the CAP is based. Donors are generally satisfied and consider the analysis correct and relevant. However operational NGOs are more critical and consider that the information is incomplete and in parts not accurate enough to be used as the basis for planning. A particular area of difficulty was the IDP figures upon which to base the CAP analysis. The difficulty stemmed from a general lack of reliable data as well as conflicting figures presented by different actors. The identification of IDP beneficiaries is inherently difficult as many IDPs are absorbed by host communities and not all IDPs are vulnerable. The IDP criterion thus needs further refinement to be useful in response planning

and should be linked to other criteria indicating vulnerability. Manifesting this uncertainty, at the time of the MYR 2007 the number of IDPs referred to was reduced 83%, from 700,000 to 120,000.

Although the CAP had identified the West of the country as its geographical priority area, there were some exceptions made as other areas demonstrate equally alarming humanitarian indicators, particularly the issue of nutrition in the North, where nutritional indicators were worse than those amongst the IDP population in the west. As a result, the country team decided to include activities in the CAP targeting these needs.

In CDI as in many other CAP countries, there sometimes seems to be a circular and overly repetitive nature to discussions of needs analysis. A CAP is presented with some sort of evidence and needs analysis; donors say it is not enough; a slight improvement is made for the next CAP; donors say it is not enough; and so on. Donors and agencies should sit down together, early enough in the CAP cycle to allow plenty of time for implementation, and agree exactly what kind of needs assessment and analysis should be done for the next CAP, who will do it, how much it will cost, and who will pay for it – preferably including recurring costs for ongoing monitoring. The same forum should discuss and agree the HC's proposal for the overall boundaries of humanitarian action in the crisis – e.g. the CDI HC's decision to focus on the West – because this decision will influence the scope and method of needs assessment. (Or, if the HC has made no such decision yet, the planned needs analysis must be designed to provide evidence with which to formulate such a decision.)

Replicable best practice and lessons learned
♦ Donors and the country team should agree, early enough in the CAP cycle to allow plenty of time for implementation, exactly what kind of needs assessment and analysis should be done for the next CAP, who will do it, how much it will cost, and who will pay for it.
♦ The HC and the country team have to make a strategic decision at a suitable (early) point in the process as to whether needs analysis and response planning will be on the basis of global vulnerability criteria (*à la* DRC) or of group or geographical targeting criteria (*à la* CDI), hence defining the overall boundaries of humanitarian needs and action. This should be agreed at the same donor-country team forum as the above point, because the decision on boundaries will affect the choice of method for needs assessment and analysis.
♦ Time and resources should be allocated to improve data collection that enables needs analysis and monitoring.
♦ The CAP workshop should not be the forum for needs analysis: that should be completed by the sectors and the inter-sectoral forum before the CAP workshop. The CAP workshop should focus on strategic priorities arising from the needs analysis.
♦ Now that global clusters are developing their needs assessment tools (their parts of the NAF, so to speak), the NAF as a next stage in its evolution may peel off its assembly of sectoral checklists, to become a tool focusing on inter-sectoral synthesis and reflection, where cross-cutting issues, vulnerabilities, prioritization across sectors and synergies among sectoral responses should be identified.

3.7   PROJECT SELECTION

The selection of projects for inclusion in the CAP 2008 was carried out at the level of the sector groups. (As noted, only the protection group calls itself a cluster.) The pre-definition of the overall objectives of the plan facilitated the task of selecting projects for inclusion. As the number of humanitarian programs and actors in the priority area are limited, the process of project selection for the CAP is relatively straightforward compared to in more complex contexts, and is largely a compilation of the on-going activities in the area. (It seems therefore that the planning process did not stimulate agencies to plan to fill identified gaps.) Some proposed projects were excluded without dispute as they clearly fell outside the strategy. Disagreements were referred to the IAHCC and/or OCHA. However, some

difficulties were still encountered as some agencies did not respect or sufficiently comprehend the strategy and thus attempted to include activities that did not fall within the framework. There were also cases of the rules not being respected as a number of projects were presented directly to OCHA without passing through the review of the sector groups. Another phenomenon that needs to be mitigated is the tendency of agency HQs to make major changes in projects including significant increases or cuts in budgets, at late stages in the process, which undermines the legitimacy of the peer bodies in-country.

Replicable best practice and lessons learned
- Need for clear, country-specific criteria for selection and for prioritisation among the selected projects. The HC should take responsibility for the success of these criteria.
- Need for clarification of the role of the sector groups in project selection.
- Need for agencies to coordinate themselves better with their HQs to avoid last-minute changes to projects.

3.8 PROJECT PRIORITISATION

There is no internal prioritization of projects included in the CDI CAP 2008, despite a requirement in the IASC CAP Technical Guidelines for 2008 for at least a two-tier or three-tier prioritization scheme. Sector groups are generally reluctant to engage in project prioritization as they consider it inappropriate to judge the projects of others while at the same time presenting their own. They consider that an independent entity would be better suited to do so.

Donors nonetheless want to see prioritization within the CAP, to clearly identify the most urgent needs and help them make funding decisions.

The CERF allocation that was granted to the CDI in 2007 was preceded by an in-country selection process that forced the humanitarian actors to prioritize among competing projects. The selection process was done in the IAHCC rather than in the sector groups, as it was considered unrealistic to expect sector group members to prioritize each others' projects (though we note that this is done in DRC). There were a number of difficulties in the process: agencies were seen as competing, and the criteria were not understood by all. Some have the impression that the CERF allocation was distributed equally amongst partners instead of being based on objective criteria. (This experience in CDI and in other countries suggests that the decentralized CERF priority identification process demands a lot from the humanitarian team in country; if it is not strong, the result will be less strategic and of less quality. The result reflects how the team works.)

Replicable best practice and lessons learned
- CAPs must have an internal prioritization of activities and projects. This is essential to help donors in their funding decisions and attract attention to the most urgent needs. However, internal prioritization is by its nature difficult and would need to be supported by strong facilitation support and the establishment of criteria as clear as possible. In addition, discussions on this topic should take into account the consequences the internal prioritization might have on the already inherent difficulties to attract funds for activities in the nature of early recovery and disaster risk reduction etc.
- The prioritization process done for the CERF can be considered a useful exercise in itself, in the sense that it fosters collaboration and joint analysis. However, it is also a test of the coordination that exists in a country and their ability to jointly establish criteria for prioritisation. These processes should ideally start already during the project submission for the CAP; this way, a country team would also be better prepared for the CERF allocation process.
- Need for country teams who are debating CERF allocations to quickly absorb the CERF criteria, and required process, which are clearly written in CERF documents.

3.9   PROJECT SHEET OR NOT?

There is general consensus that the project sheets are useful. NGOs find that the project sheets show the link with the CAP analysis and strategies, thus ensuring the coherence of the document. Donors find that the project sheets facilitate their making recommendations to their capitals. Having a project in the CAP is seen by some donors as a quality label, although it is not a condition for their funding. Some agencies mentioned that the format could be better, so that more information could be included.

Replicable best practice and lessons learned
♦   Maintain project sheets, but move to on-line format, printed only on demand, easily updated in electronic format.

3.10   MONITORING

Monitoring systems for CAP outputs and impact are not yet in place. The 2008 CAP does not report on the results achieved in 2007, a reflection of a gap in follow-up and strategic-level monitoring of the crisis and humanitarian response. While indicators are included in the document, they are not followed up from one year to another. Donors did complain of not having seen the improvements in the humanitarian situation from 2007 to 2008 and the added value of their contributions.

There is a vacuum in terms of responsibilities regarding CAP monitoring. Lead agencies do not know what they are expected to do in terms of monitoring of their sectors, and guidance has not been provided. There is generally no monitoring on the sector level, only at agency level.

Replicable best practice and lessons learned
♦   Donor should emphasize on the necessity of having proper monitoring and evaluation systems in place for the CAP.
♦   Each CAP should specify a strategic monitoring framework, with indicators referring to process, output, and impact (as required in the CAP technical guidelines).
♦   Clear guidance should be given to each sector on monitoring procedures and expectations.
♦   Monitoring of the previous year should be reported clearly in the CAP, as required in the CAP guidelines.

3.11   COORDINATION

The coordination structures in CDI consist of sector groups and the IAHCC. The sector groups are headed by UN agencies with the participation of NGOs and the representatives from the Government. ICRC participates as an observer at the IAHCC level.

With regards to the CAP, there was reportedly from the donors' perspective an element of confusion between the programmes and appeals for funds of the Government and those of the humanitarian community. Donors call for greater engagement on the part of the Government, increasingly so as the country gets more stable. There were also calls for greater engagement of agency heads in the sector groups.

Replicable best practice and lessons learned
♦   Ensure complementary approaches between Government and UN/NGOs on the level of programme planning and appeals for funds. In particular, the CAP should make clear reference to what needs the Government plans to cover (and to appeal for separately), and how the activities proposed in the CAP synchronise with Government-led recovery and development plans.

3.12 DONORS

There is at present no formal donor collaboration forum, but there are spontaneous bilateral contacts between donors to ensure synergy and avoid duplication. There used to be a *Groupe de Reflection Strategique* that met once a month, but it is unclear how this will be organised in 2008.

There is a risk with the current approach to the CAP that it does not present an overall analysis of humanitarian needs, as some actors choose to stay outside the framework. The humanitarian analysis of some donors (e.g. ECHO) is not fully integrated into the CAP.

Replicable best practice and lessons learned
- Donors should participate actively in the CAP at all stages, including feedback and specific critiques after launch, prompting corrections without waiting for the mid-year review.
- Donors should coordinate and mutually choreograph their funding decisions, in order to avoid gaps and duplication. Forming a structured and permanent donor coordination cell – including donors without representation in Abidjan by telecon or videocon – seems the best option.

4. FURTHER RECOMMENDATIONS, BEST PRACTICES, AND LESSONS LEARNED

(Note: although this study intended to focus on the CAP process to produce recommendations for translating needs analysis into credible, evidence-based CAPs with well-selected and prioritised projects, inevitably reference is made to clusters or sector groups, as these are at the cutting edge of implementing such analysis and selection.)

♦ Resources should be put at the disposal of clusters or sector leads to ensure that systematic assessments and baseline data collection can be ensured. In parallel, support to national data collection mechanisms, although it may seem a "non-CAP" activity, should be provided, as it would ensure better indicators which would in turn help decision-making. Furthermore, the NAF should develop as fully cluster-compatible, and cluster lead agencies at headquarters and field level should feel ownership of the NAF. The NAF should become, more than a collection of sectoral data or checklists, a tool where cross-cutting issues and vulnerabilities should be identified, and priorities identified on an inter-sectoral plane.
♦ NGO inclusiveness: Fuller involvement of NGOs in strategic planning should be commensurate with their predominant role in implementation. Cluster co-leadership by NGOs should be explored.
♦ Cluster leads should be funded for their coordination role (either by their HQ or directly by donors) in order to avoid their dependency on the overhead costs of projects implemented by NGOs.
♦ Agencies and NGOs feel that donors have much to contribute in terms of strategies and priorities. Donors should be more present, and more active, throughout the CAP process.

DRC & CDI CAP Funding: 2004-2008

Country / year	Appeal funding requirements	Appeal funding received	% Funding coverage (excl. 2008)	Total humanitarian funding
Cote d'Ivoire + 3 2004	64,197,916	20,544,506	32%	44,160,079
Cote d'Ivoire 2005	36,431,798	20,214,942	55%	33,351,142
Cote d'Ivoire 2006	43,523,872	22,652,252	52%	38,272,678
Cote d'Ivoire 2007	55,297,744	31,156,166	56%	34,507,414
SUB-TOTAL CDI 2004-7	**199,451,330**	**94,567,866**	**47%**	**150,291,313**
Côte d'Ivoire 2008	47,373,931	731,735		
DRC 2004	162,602,463	118,811,484	73%	224,034,403
DRC 2005	219,757,245	142,500,101	65%	273,265,395
DRC 2006	696,024,728	354,124,777	51%	447,604,767
DRC 2007	686,591,107	460,438,131	67%	492,108,684
SUB-TOTAL DRC 2004-7	**1,764,975,543**	**1,075,874,493**	**61%**	**1,437,013,249**
DRC 2008	575,654,173	-		

ANNEX I.

TERMES DE RÉFÉRENCE GROUPE SECTORIEL EAU ET ASSAINISSEMENT – CÔTE D'IVOIRE

1- Contexte
Afin d'appuyer l'action humanitaire au faveur des personnes rendues vulnérables par la crise socio-politique et militaire en Côte d'Ivoire depuis le 19 Septembre 2002, il est créé un Groupe Sectoriel Eau et Assainissement présidé par l'UNICEF dont l'objectif est de favoriser les échanges d'informations entre les différents intervenants du secteur, et de proposer une stratégie et un plan cohérent d'intervention en situation d'urgence.

2- Objectifs
♦ Coordonner les interventions dans le secteur Eau et Assainissement ;
♦ Formuler des stratégies et des programmes d'interventions prioritaires dans le secteur ;
♦ Elaborer des projets de financement à soumettre aux bailleurs dans le cadre d'une action concertée;
♦ Mettre en œuvre le plan d'actions proposé ;
♦ Contribuer à l'optimisation de l'utilisation des ressources financières et humaines;
♦ Informer régulièrement le IAHCC sur les activités du Groupe Sectoriel;
♦ Faire le bilan des interventions du secteur.

3- Activités
♦ Établir un diagnostic général de la desserte en eau potable et des conditions d'hygiène des populations affectées ;
♦ Proposer un plan d'action pour garantir l'accès à l'eau potable, à un système adéquat d'assainissement et enfin une stratégie de communication / sensibilisation et prévention des épidémies d'origine hydrique et fécale ;
♦ Vérifier/Contrôler la qualité de l'eau en cas de présomption de contamination;
♦ Elaborer et appliquer un programme de sensibilisation pour l'adoption de comportements hygiéniques par rapport à l'eau (affiches, cartes murales, radio, etc.) ;
♦ Appuyer les communautés à aménager les points d'eau et à assainir leur cadre de vie (appui en matériel d'entretien et produits désinfectants, etc.);
♦ Contribuer à la création de nouveaux points d'eau et à la réhabilitation des pompes existantes;
♦ Construire des latrines et autres installations permettant d'améliorer le cadre de vie des personnes victimes de la crise.

4- Résultats attendus
♦ Les sources d'eau contaminées sont identifiées et traitées;
♦ L'eau potable est disponible et accessible aux personnes victimes de la crise;
♦ Les populations affectées ont accès à des installations adéquates d'évacuation des excréta;
♦ Les groupes cibles connaissent, appliquent et diffusent les règles d'hygiène au sein de leurs communautés ;
♦ Une cartographie des interventions du secteur est disponible.
♦ Le plan d'action du groupe sectoriel est exécuté.

5- Structures
Le Groupe Sectoriel est ouvert à toutes les Agences du SNU, aux Services Administratifs et privés en charge de l'eau, de l'hygiène, de l'assainissement et de l'environnement, aux Institutions et Partenaires au développement ainsi qu'aux ONG nationales et internationales.

6- Périodicité des réunions
La périodicité des réunions du Groupe Sectoriel est de deux (2) semaines. Les réunions se déroulent les Mardi en quinze à partir de 14 h 30 dans les locaux de l'UNICEF.

7- Composition :

Présidence: UNICEF.

Co-Présidence :   **Direction de l'Hydraulique Humaine** du Ministère d'Etat, Ministère des Infrastructures Economiques

Secrétariat :   **ONEF** et **LIAAI**

Membres :   Agences du SNU (UNICEF, OMS, UNHCR, PAM, OCHA, UNDP, UNFPA, etc.), Ministère des Infrastructures Economiques (Direction de l'Hydraulique Humaine), Ministère de la Construction et de l'Urbanisme (Direction de l'Assainissement), Ministère de de l'Environnement et du Cadre de Vie (Direction de l'Environnement), Institut National d'Hygiène Publique (INHP), Programme National d'Eradication du Ver de Guinée-Eau & Assainissement (PNEVG), GTZ/IS, SODECI, OXFAM, CICR, IRC, SOLIDARITES, ONEF, BIEEN, UVDS, LIAAI, etc..

    <u>NB</u> : Cette liste n'est pas exhaustive et sera complétée au fur et à mesure.

Jour de réunion :   **Mardi 14h30 à 16h30**

Périodicité :   **Bi-mensuelle**

ANNEX II.

TERMES DE REFERENCE INTER-CLUSTER - DRC

Janvier 2008 – République Démocratique du Congo

I.   Historique :

Dans le cadre de la réforme humanitaire, le renforcement du système de responsabilisation sectorielle sur les thèmes humanitaires qui ne sont pas repris dans les mandats spécifiques des clusters a été proposé comme un élément clé a introduire en RDC. Le but de cette initiative est de consolider la réponse humanitaire globale, en insistant sur la définition de standards de prédictibilité, transparence et partenariat dans tous les secteurs et domaines d'activité humanitaire. Le résultat escompté est d'obtenir plus de stratégie dans les réponses, une priorisation des besoins améliorée et une utilisation des ressources disponibles optimisée, à travers une meilleure définition des rôles et responsabilités des acteurs humanitaires dans tous les secteurs.

A ce jour, dix clusters sont opérationnels au niveau national et provincial en RDC. L'inter-cluster s'avère indispensable pour assurer une coordination horizontale des clusters. L'inter-cluster est le forum technique et de conseil du HAG (Humanitaire Advocacy Group) et donc des Chef des Agences et du Coordinateur Humanitaire pour toute discussion et travail stratégique concernant la planification et la réponse de la communauté humanitaire en RDC. L'inter-Cluster est responsable pour développer et proposer les stratégies qui seront ensuite validées par la communauté humanitaire. L'inter-cluster a aussi le rôle essentiel d'assurer la transversalité des sujets multi-sectoriels (ex. le gendre, VIH/SIDA, etc.) dans les planifications et réponses.

II.   Objectifs génériques de l'inter-cluster

L'inter-cluster permet d'optimiser la couverture et la réponse aux besoins identifiés des populations vulnérables grâce aux actions suivantes :
- Elaborer les outils d'évaluation des besoins multi-sectoriels
- Elaborer les cartographies des besoins humanitaires multi-sectoriels et l'établissement des priorités
- Assurer l'approche multi-sectorielle des réponses humanitaires aux besoins identifiés
- Optimiser les ressources disponibles offertes à tous les clusters par les services communs
- Eviter les duplications et encourager la complémentarité d'actions
- Identifier les capacités de réponse et les lacunes
- Mobiliser les ressources pour couvrir les lacunes constatées
- Renforcer les capacités de réponse à travers une planification adéquate commune
- Assurer la prise en compte des sujets transversaux dans toutes les phases de travail des clusters.

III.   Responsabilités principales des participants
- Participer aux activités de coordination de l'inter-cluster (réunions, missions, etc.)
- Partager les informations sur leurs programmes, évaluations, missions, etc.
- Mettre en œuvre des activités humanitaires selon la stratégie/approche convenue
- Soutenir le comblement de lacunes identifiées au sein de l'inter-cluster
- Participer à l'élaboration des documents stratégiques (PAH, et Revue à mi-parcours)
- Participer à la définition des priorités et à la révision des projets sélectionnés pour le Pooled Fund

IV.   Tâches génériques de l'inter-cluster
- Etablir des mécanismes de récolte de données sur les indicateurs humanitaire clés
- Evaluer et prioriser les besoins à l'échelle nationale
- Planifier des mesures de préparation de réponse d'urgence multi-sectorielles adéquates (inclus l'élaboration des plans de contingence)

- ♦ Identifier les lacunes dans les réponses aux besoins identifiés
- ♦ Réviser les projets présentés par les clusters pour répondre aux lacunes identifiées dans le cadre du Pooled Fund
- ♦ Elaborer/actualiser les stratégies pour l'élaboration du PAH
- ♦ Suivre et évaluer l'impact des activités des clusters ainsi que les progrès accomplis en regard de la mise en œuvre du HAP

V.   Modalités pratiques :

Présidence et secrétariat: OCHA

Participants :
Chefs de file des clusters
Points focaux des sous-commissions des clusters et/ou autres commissions thématiques
Représentants des ONGs ?
Bailleurs ?

Présence du cluster sur le terrain :
Le terrain a le choix d'intégrer le forum inter-cluster dans son CPIA ou, s'il le souhaite, de créer un forum à part.

Tenue des réunions : 2 fois par mois

Reportage :
L'inter- cluster doit circuler les comptes rendus des réunions aux membres de l'inter-cluster et les poster sur le site web www.rdc-humanitaire.net. En outre, l'inter cluster rapportera au HAG les évènements/décisions importants et/ou aux CPIA.
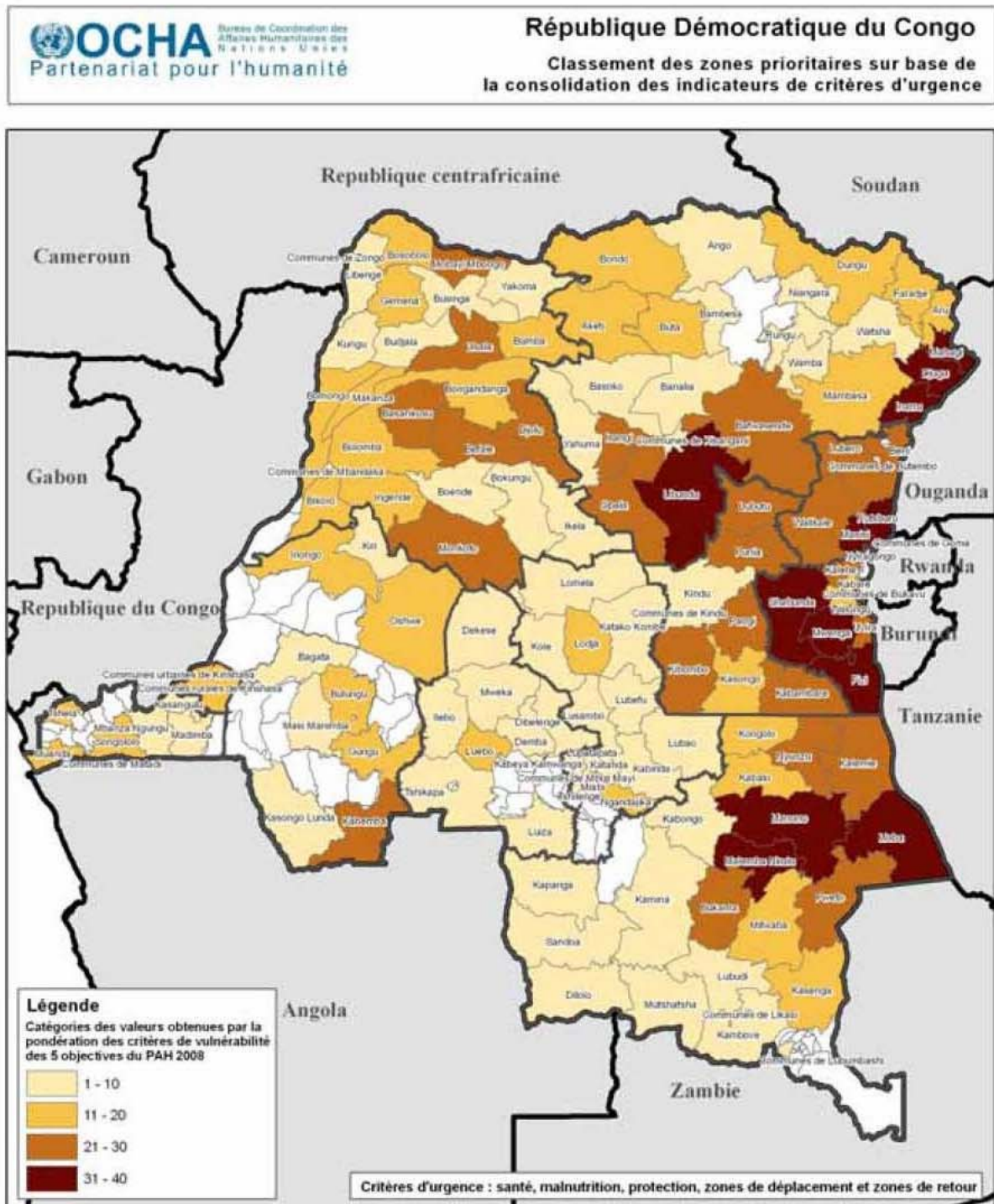
ANNEX III.

DRAFT MONITORING HAP 2008 - DRC

MONITORING PAH 2008			
	Résponsable	**Frequence**	**Resultat**
A. Monitoring de l'évolution du contexte			
1. Facteurs contextuelles affectant la situation humanitaire	OCHA/PFH Provinces	hebdomadaire	Rapports provinciaux hebdomadaires, rapports nationaux mensuels, rapports de situation as
évolution politico-militaire			
crises (naturelles ou autres)			
2. Monitoring de l'access Humanitaire			
liste des axes routieres par province	cluster logistique	Trimestriel	cartographie des axes accessibles physiquement
description de l'etat des routes (transitable/non transitable)			
liste des activitées de rehabilitation en cours			
liste des incidents securitaires par axe	OCHA/PFH Provinces/DSS	Trimestriel	cartographie des axes non transitables due a l'insecurité
liste des axes transitables seulement avec escorte			
liste des missions effectuées (par tous les partenaires)			
3. Tracasseries administratives	OCHA/PFH Provinces	Trimestriel	type et nombre des tracasseries par province
liste et chronology des incidents de tracasseries par les autorités (et type)			
liste des actions prises			
liste des résultats des actions			
4. Missions Inter-agence	OCHA/PFH Provinces	Trimestriel	% des territoires couvertes
liste des missions par province par mois - % des territoires couvertes			
liste des activités mise en place suite aux missions			
5. Suivi des catastrophes naturelles	OCHA/PFH Provinces	Trimestriel	cartographie des zones affectés par les catastrophes naturelles
listes des zones et populations affectés par les catastrophes naturelles			
B. Monitoring des scénarios			
Plans de contingence provinciaux	OCHA/PFH Provinces	Bi-annuelle (Mai-Septembre)	Plans de contingence provinciaux
C. Monitoring de l'évolution des réponses aux priorités stratégiques (par cluster)			
WATSAN :	UNICEF	Trimestrielle	donnés par territoires / consolidation nationale
Nb de personnes beneficient du paquet minimum WATSAN (specifié déplaces et retournés)			
Nb des écoles bénéficié du packet minimum watsan			
Nb des crises cholera et/ou maladies vectorielles repondues avec intervention watsan d'urgence			
Nb des zones endémo-épidémiques assistés avec une réponse préventive durable			
Nb de nouvelles personnes ayant accès à l'eau potable			
LOGISTIQUE :	PAM	Trimestrielle	donnés par territoires / consolidation nationale
Routes			
Nb de personnes nouvellement accessibles :			
Nombre des nouvelles axes routieres rehabilitées ou construites (et nb des Km)			
Type et nb d'infrastructure réhabilitée :			
FLoAT			
nb et type des infrastructures réhabilitées			
nb des personnes nouvellement accessibles			
EDUCATION :	UNICEF	Trimestrielle	donnés par territoires / consolidation nationale
Nb d'enfant déplaces/retournés qui ont accès à l'école :			
Nb d'enseignants ayant bénéficié d'une formation :			
Nb de salle de classe réhabilitées et équipées :			
SANTE :	OMS	Trimestrielle	donnés par territoires / consolidation nationale
Nb; des structures sanitaires appuyées (vs. non appuyées)			
Nb de bénéficiaires directs bénéficiant des soins de santé :			
Nb de personnel de santé formés et ou recyclés			
Nb de structures de santé réhabilités et équipés par type (maternités, OGR, dispensaires…) :			
% couverture vaccinale par zone de santé			
NUTRITION:	UNICEF	Trimestrielle	donnés par territoires / consolidation nationale
Nb de bénéficiaires admis dans les structures nutritionnelle par type (CNS/CNT)			
Nb de personnel des centres nutritionnels formés et ou recyclés			
Nb d'enfants guéris (déchargés des centres) / Taux de guérison dans les structures de réhabilitation nutritionnelle (> 80%)			
Taux de décès dans les structures de réhabilitation nutritionnelle (< 5%)			
Nombre des enquetes nutritionnels aménées par province			

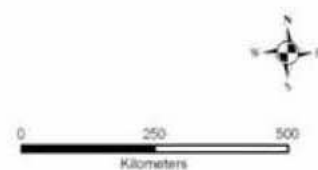|			
SECURITE ALIMENTAIRE			
Agriculture/Pêche			
Nombre de ménages ayant reçu des intrants et équipements agricoles/pêche			
Superficies cultivées (ha)			
Nombre de personnes formées	FAO/PAM	Trimestrielle	donnés par territoires / consolidation nationale
Nb. Des ménages ayant recu des vivres pour la protection des semences			
Distribution alimentaire			
Nombre de personnes ayant reçu une ration alimentaire correspondant aux besoins identifiés			
Tonnage distribués			
PROTECTION:			
Gbv			
Nb. Des victimes de violence sexuelles identifiées			
Nb de victimes de violence prises en charge médicalement			
Nb; des victimes referées en moins de 72 heures et ayant recu un kit PEP	UNFPA/OCHA	Trimestrielle	donnés par territoires / consolidation nationale
Nb de victimes de violence prises en charge psychologiquement			
Nb de victimes réintégrées socialement et économiquement			
Nb des cas des GBV referées en justice			
Mines			
Superficie totale déminée	UNMACC	Trimestrielle	donnés par territoires / consolidation nationale
Superficie totale sécurisée			
Nb d'engins sécurisés			
Monitoring			
Nb de rapports recoltés	UNHCR	Trimestrielle	donnés par territoires / consolidation nationale
Nb d'incidents enregistrés			
Child protection			
Nb de EAFGA démobilizés			
Nb de EAFGA ayant recu un assistance holistique	UNICEF	Trimestrielle	donnés par territoires / consolidation nationale
Nb; des ENAS reunifiées			
SHELTER/NFI			
Nb de ménages déplacés, victimes de crises qui reçoivent des biens non alimentaires et abris d'urgence			
Nb de ménages rapatriés qui reçoivent des biens non alimentaires et abris d'urgence	UNICEF	Trimestrielle	donnés par territoires / consolidation nationale
Nb de kits NFI distribués			
Nb de kits abris urgence distribués			
RRC:			
Return			
Nb de kits retour distribués			
Nb de kits abris retour distribués			
Nb de personnes transportées			
Nb de points d'eau aménagés	HCR	Trimestrielle	donnés par territoires / consolidation nationale
Nb de centre santé réhabilités			
Nb de latrines construites			
Nb de salles de classes réhabilitées			
Nb de comités de gestion crées			
COORDINATION:			
Nb de clic sur le site web RDC humanitaire			
Nb de supports d'information produits			
Nb des INGO participant au clusters	OCHA Kin/Provinces	Trimestrielle	donnés par territoires / consolidation nationale
Nb des ONG nationales participant au clusters			
Nb des autorités nationales participant au mecanismes de coordination			
Percentage of identified IM needs (maps, databases, electronic forms, etc.) for which			
D. Monitoring des ranking des territoires			
les indicateurs par territoires remplis dans la section anterior serviron pour faire le suivi des interventions par rapport aux territoires definis comme prioritaires dans le tableau du ranking to Plan d'Action.			
E. Monitoring des indicateurs d'impact (dans les zones d'intervention) sur les objectives stratégiques (par chef de file responsable de chaque objectif stratégique)			
- Indicateurs de mortalité	OMS	Mai- Septembre	Revue Mi-parcour
- Indicateurs malnutrition	UNICEF	Mai- Septembre	Revue Mi-parcour
- Indicateurs de protection	UNHCR	Mai- Septembre	Revue Mi-parcour
SGBV	UNFPA	Mai- Septembre	Revue Mi-parcour
Mines	UNMACC	Mai- Septembre	Revue Mi-parcour
Protection de l'enfance	UNICEF	Mai- Septembre	Revue Mi-parcour
Monitoring protection des civiles	UNHCR	Mai- Septembre	Revue Mi-parcour
- Indicateurs sur les déplacés internes	OCHA	Mai- Septembre	Revue Mi-parcour
- Indicateurs sur les retournés	UNHCR/UNDP	Mai- Septembre	Revue Mi-parcour

ANNEX IV. CLASSEMENT DES ZONES PRIORITAIRE

ANNEX V. PRIORITISATION TOOL – DRC (EXCERPT)

HAP 2008 / PRIORITIES

Pondération			1	2	3	4	5	1	2	3	4	5	3	4	5	2	2	4	2	5	5	3	4	5	5	2	2	3	
			IDPS					Retournés					Protection				VS		Malnutrition		Santé								
Province	Territoire	Rank	0 - 4,999	5,000 - 9,999	10,000 - 29,999	30,000 - 99,999	> 100,000	0 - 4,999	5,000 - 9,999	10,000 - 29,999	30,000 - 99,999	> 100,000	Territoire actuellement stable mais ayant des situations spécifiques de violations des droits des enfants	Territoire affecté par l'insécurité lié aux activités du FARDC; un nombre important des déplacés, un territoire potentiellement instable	Territoire actuellement affecté par le conflit armé (avec activité des groupes armés) et les nouveaux cas de déplacement	Mines et ENE infestation	Plus de 20 cas/mois liés à la VS	Plus de 50 cas/mois liés à la VS	MAG compris entre 5-9% avec facteurs aggravants	MAG entre 10-14% (et/ou MAS>2%)	# Epidémies ou Endémies	ZS sans action	CV DTC3<50%	Mortalité maternelle intra hospitalière (MMIH) > 1%	Mortalité Infantile (MI) >2/10,000/Jour	VIH > 4,5%	CPN < 50%	Couverture sanitaire (CS) < 50%	TOTAL SCORE
Ituri	Djugu	1			1							1			1	1		1	1		1		1		1		1	1	40
Sud Kivu	Shabunda	2			1				1					1		1		1		1	1	1		1	1		1	1	40
Ituri	Irumu	3				1						1		1		1		1		1	1		1		1				39
Ituri	Mahagi	4			1							1		1		1		1	1		1		1		1		1	1	39
Sud Kivu	Fizi	5			1							1		1		1		1			1		1	1	1				38
Katanga	Malemba Nkulu	6			1									1		1				1	1		1	1	1	1	1	1	37
Sud Kivu	Mwenga	7			1						1			1		1		1	1		1	1		1				1	36
Katanga	Moba	8								1				1		1				1	1		1	1		1		1	33
Katanga	Manono	9									1			1		1				1	1		1	1		1	1	1	31
Nord Kivu	Masisi	10					1							1		1		1		1	1				1				31
Nord Kivu	Rutshuru	11					1							1		1		1		1	1			1					31
Province Orientale	Ubundu	12											1			1		1		1	1	1	1				1	1	31
Equateur	Befale	13											1			1				1	1	1		1	1		1		30
Nord Kivu	Walikale	14			1						1			1		1	1			1	1	1					1		30

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