Participants: Athalie Mayo and Sean Price (GLC), Caroline Teyssier (ETC), Jennifer Chase (GBV AoR), Jim Robinson (HLP AoR), Linda Doull (GHC), Maria Agnese Giordano and Anthony Nolan (GEC), Michael Copland (CP AoR), Miguel Urquia (GSC), Monica Ramos (WASH), Stefano Fedele (GNC), Wan Sophonpanich (CCCM/natural disasters), Yasmine Elbehiery (GPC); Marina Skuric-Prodanovic (GCCG Chair), Randa Hassan and Maryan Hussein (GCCG-S).

Additional invitees: Charles Antoine Hofmann (RG2), Tanya Axisa (RG2), David Goetghebuer (OCHA).

Summary of Discussion	Action Points
1) Agenda, follow-up on past action points:	
 The GCCG Chair provided: An overview of the agenda for the meeting was shared and accepted by the GCCG. A tentative list of topics for the next meeting was also shared for comments. One of the GCCs proposed was to have a discussion on the HNO/ HRP process and how it was proceeding at country level and what general themes were emerging. The first part of the discussion would be a GCC-only discussion and then this could be followed with a Q&A with OCHA colleagues dealing with the HPC. With regard to forward events planning, only four replies had been received by the GCCG-S. All GCCs who had not done so already were requested to share information about major events they might be planning to minimize the possibility of scheduling overlaps. The GCCG Secretariat mailbox has been renamed GCCG-Secretariat (the email address however stays the same as before gccg-globalclusters@un.org) to distinguish it from the mailing lists, noting that any emails sent to that address are only seen by the GCCG Secretariat, who is happy to further disseminate information to the GCCG Global Cluster mailing list. As agreed, there are now two mailing lists — OCHA-GCCs-only - for coordinators and deputies only; and another OCHA-GCCG-Extended for a larger audience of cluster and cluster-related contacts. It is up to the coordinators or deputies to forward more restricted documents intended for only coordinators/deputies to a larger audience (e.g. invitations to meetings, etc), noting that coordinators should only delegate to other participants if they are not able to attend themselves. The GCCG MS Teams platform has been opened particularly for the "looking back to step forward" exercise. This will not replace the circulation of emails but will be used for sending reminders and posting documents that people find too difficult to find. Based on responses from GCCs, it was agreed that the next GCCG meeting would take place on Friday, 16 October, 11:00-12:30 GCCs were reminded that	 GCCG-S to add a discussion on the HNO/HRP to the agenda of the next meeting. GCCG members to share information about major events or major retreats – ASAP. GCCG members to check whether they have access and can view contents on the new TEAMS platform
2) GCCG representation at the JIAG The GCCG Chair indicated that two nominations had been received - Monica Ramos (Global WASH Cluster Coordinator) and Emma Fitzpatrick (Global Health Cluster Deputy Coordinator) – to replace Stefano Fedele (GNC) and William Chemaly (GPC) in representing the GCCG in the JIAG. She suggested there may be no need for a voting process if a) there were no additional nominations; b) there were no objections to these nominations. As no additional nominations were received and GCCs indicated their agreement with this proposal, it was agreed that Ms. Monica Ramos and Ms. Emma Fitzpatrick would represent the GCCG in the JIAG. Mr. Fedele agreed these candidates were excellent choices and that he and Mr. Chemaly looked forward to handing over responsibilities to them.	
3) <u>Update of GHRP progress report</u> Mr. Goetghebuer (OCHA) provided an update on the GHRP progress report, which was finalised and published online on Sunday, with a one-week delay. This delay plus the assumption that there would be very little new data in the next two weeks has impacted the original plan by which everyone had been asked to contribute by 20 October.	4. OCHA to share final list of countries involved in next year's GHRP.

The submission of data and narrative on achievements are expected on **Monday 2 November**. Template and details will be shared with agencies, clusters and NGOs.

This will be followed by the launch of the GHO on 1 December, which will have a section on the GHRP. For that month there will be no reporting against data.

Next year there will be no GRHP at the global level, therefore there will be no request at country level to produce an HRP in which the COVID component is tagged and can be extracted. This is because it is very clear COVID is simply one factor of crises among others in needs assessment, while the HRP sets a strategy to address those needs. At cluster and project level, it will no longer be required to extract the portion of actions which is COVID related. However, there may be request for some narrative reporting on COVID-specific aspects, however with no request for data and financing related to COVID.

In the discussion that followed Mr. Goetghebuer provided the following responses to questions received:

- The GBV AoR noted that the GHRP had covered a total of 64-65 countries and asked whether this meant we were back to 30+ cluster-activated countries. Mr. Goetghebuer confirmed that for next year, countries which have an HRP will have in their response a part which is COVID-related, which would be reflected in the GHO in December and then updated across the year. This will cover all GHO countries which are the same as this year as well as a few new ones (e.g. Pakistan, Mozambique and a few others).
- The GNC noted that it might not be very responsible not to take advantage of support, guidance and tools developed by the clusters, just because a country may not have activated an HRP. This is especially important in adapting to changing needs. A better solution needs to be found, rather than just going back to the old way of doing things, especially as one of the objectives was to improve sector coordination before, during and after the crisis. Mr. Goetghebuer responded that the choice of HRP/GHO was left to individual countries, but this did not exclude the possibility of them needing and getting support, funds and coordination. The CP AoR concurred with the GNC's point and stressed this was particularly important for work around preparedness and the learning around government engagement.
- Mr. Goetghebuer noted the concerns expressed and suggested that perhaps the messaging around this needed to be improved.
- The GBV AoR said this was important for GBV as a lot of new GBV groups had been established and this was relevant to preparedness.
- The GNC asked for a list of countries for the next GHRP and asked if there would any
 discussion around the list of countries. Mr. Goetghebuer said the discussion around the list
 of countries had concluded three weeks ago. It was agreed this list would be shared with
 the GCCG.

4) <u>COVID-19 Risk Communications and Community Engagement (RCCE) and the Humanitarian System</u>

5)

Please see below link to powerpoint presentation for full details:

https://drive.google.com/drive/folders/1YneR-T_DRvIiKRBaSyH0Zz3iZlpPAJgZ?usp=sharing

The Chair introduced representatives of IASC RG2 Tanya Axisa (RG2 Coordinator) and Charles Antoine Hofmann (RG2, RCCE, UNICEF). Ms. Axisa explained that the OPAG at its meeting on 21 May had requested RG2 to compile information on how the RCCE collective service links with the global and country level humanitarian architecture, which resulted in a briefing package. Existing RCCE experience at the country level was reviewed and there were global level consultations with all the members of RG2 as well as GC leads, all resulting in adjusted FAQs. Consulted RG2 members included a wide range of local and international NGOs as well as UN agencies mainly consisting of AAP, PSEA, Gender, Age and Disability experts. Three main areas were touched upon in the consultations:

5. RCCE to eventually revert to GCCG with more tangible country examples demonstrating RCCE work.

- Engagement: Many clusters are not aware of the impact of the collective service at ground level demonstrating a disconnect between the global and country level.
- Mutual benefit: The collective service should be demand-driven, non-bureaucratic, provide technical support, highlight good practices, and provide global guidance.
- Gaps and concerns: Duplicating the work of existing humanitarian architecture can be
 an issue; there is a need for a clear generic TOR to better identify the links between
 RCCE work and humanitarian architecture; clarity was needed on the scope of service;
 ensure do-no-harm.

Suggestions included: better integration of work with protection; improved engagement with clusters on the ground; development of a survey to identify views of country clusters; generic TOR that can be adapted at country level to better identify linkages; aligning the work of the RCCE with existing accountability structures and the work of the clusters on the ground; aligning the work of the RCCE with the work of clusters on the ground.

Conclusions included: as the pandemic transcends public health impact, so should coordination efforts; community engagement and trust was needed – this included considering at country level who is best placed to lead RCCE work on the ground e.g. local NGO, UN agency, cluster etc; RCCE and AAP/CE working groups should work closely together as communities will not distinguish between RCCE and AAP/CE.

Mr. Hofmann emphasised the importance of focusing on local knowledge; the need to strengthen accountability; focusing on coordination in order to provide guidance, support analysis, tool, etc. He noted growing fatigue, the spread of misinformation and mistrust and ensuing increased risk. He noted this was an interagency effort involving a range of experts in WHO, IFRC and UNICEF at global level and also regional levels - East/Southern and West/Central Africa.

The four strategic areas of focus are to: 1. strengthen common and coordinated RCCE approaches; 2. generate evidence about community perspectives for responsive action; 3. improve the quality and consistency of community engagement approaches; and, 4. strengthen local capacity, existing coordination mechanisms and reinforce local solutions.

Top priorities going forward will include: launching the RCCE Strategy; continuing capacity building and technical support; training; helpdesk & online knowledge hub (connected to Global Platform); surge capacity; strengthening evidence on impact to inform operational and strategic decisions (collaboration with Dalberg); documenting lessons of RCCE Collective Service (real-time review by ODI as part of broader research project); continuing to engage with partners/IASC (including RG2).

Discussion:

The Chair asked the presenters to identify key asks from the GCCG. Ms. Axisa said that RG2 would like to GCCG to stay engaged and to continue to provide feedback and suggestions which can be fed to RCCE collective service. Mr. Hofmann underscored the importance of country-level coordination and that clusters can play an important role in making connections with working groups.

The GHC thanked the presenters and noted that main feedback from the Health Cluster Coordinators that there was excessive focus on the global structures and that they were keen to see how this would work at the country level. She asked if more clarity could be provided on concrete benefits at country level.

The CP AoR enquired about the links between PSEA, RCCE and AAP, what this meant for PSEA, the 2-3-year outlook and sustainability. The GPC asked for more details about the help desk function of the service.

Ms. Axisa said that for RG2, SEA constituted some of the most fundamental breaches of accountability and that she definitely saw a link between this work and the work of the RCCE.

Mr. Hofmann agreed that there was a need to better gather and present evidence of what was happening at country level. He also acknowledged there were still gaps. He also agreed with the help desk function. In terms of long-term plans, there seems to be a need for regional structures but there was not full agreement on what model was needed at the global level in the longer-term.

6) Inclusive Coordination: Building an Area-Based Humanitarian Coordination Model: embargoed paper by the Centre for Global Development

The GCCG Chair reminded GCCs, that the GCCG had already previously engaged in a discussion with Jeremy Konyndyk, one the authors of the paper. The embargoed paper had been shared with the GCCs, with a virtual launch on 13 October – the invitation has been shared with GCCs. She opened the floor for GCCG comments, questions reflections.

Discussion and comments made:

- A couple of clusters reflected on the issue of financing brought up by the paper and noted
 that the concept of clusters controlling the financing was a misconception and overrated –
 large agencies get funding despite the cluster approach. The focus on financing just shifts
 away attention from the important issues of coordination and the commitment to resource
 donations can solve that problem and is unsure of a theory-based model based on structural
 issues.
- The shift from the central to area-based model is not a surprise clusters have been doing
 this for a while. The big questions are: what functions will be at what level (national or
 subnational), how efficient this will be and how they will be resourced.
- One GCC mentioned that one of the reasons that the shift to the subnational had never really taken place because of resource issues – and that an area-based approach won't necessarily resolve.
- One GCC stressed that what was missing from the paper was if the expectation is that humanitarian organizations support national capacities, including working more closely with national authorities / line ministries it was unclear from the paper how area-based coordination would relate to and reinforce this.
- Many clusters saw area-based coordination and the cluster system coexisting quite well
 together, with some noting that sub-national coordination is not the silver bullet to all
 problems and the importance of avoiding the one-size-fits all assumption.
- In response to a request to provide more details on the panel and what would be OCHA's stance the Chair mentioned that Rein Paulsen (acting Director of the Coordination Division) would be on the panel with the Deputy Director of ECHO, and a couple of NGOs (one international, one local). Mr. Paulsen's remarks will likely unpack area-based coordination in context-specific environments and pointing to complementarities with the cluster approach. He would also likely highlight the need for more integrated approaches and multi-sectoral analysis and planning (including the JIAF, etc) in line with people's needs. She encouraged the GCCs to share any additional comments and suggestions they may have in writing.
- A number of clusters thought that a lot of the criticism of the system in the paper was quite valid and welcomed the paper and the ensuing debate – but were not convinced that what was being proposed was the solution. A number called for a system-wide evaluation of coordination. Some questioned whether the discussion would just pay lip service to the issue and if the IASC Principals would take this one up and seriously engage in a review of coordination.
- The issue of resourcing was an inherent issue. The concern is that the CGD paper presents
 area-based approaches as something that is not happening at all in the field. The Urban
 Settlements Working Group is putting together a policy document/guidance notes on what
 area-based coordination means in practice and that it might be good to have this group
 present to the GCCG what this guidance will be.
- One GCC underlined that the COVID-19 response had been a case in point when the GHRP was turned over to the CLAs/agencies rather than the clusters, the process became messy and was subsequently turned back to the clusters.

- 6. GCCs to send written comments on elements that should feature in the letter of response by end of the week (16 October).
- 7. GCCG-Ś to follow up with ALNAP on inception report.
- 8. GCCG-S to relay query to IASC-S on whether the IASC Principals intended to follow through with further action on the need to review coordination.

- One GCC enquired whether perhaps too much attention was being given to this paper in relation to others and whether the GCCG intended to engage on similar papers published (e.g. ALNAP' forthcoming paper). A number of other clusters disagreed with the suggestion that disproportionate attention was being given to this paper and thought the paper merited significant reflection. The Chair agreed that the GCCG-S would follow up with ALNAP on the inception report they had just released.
- Finally, the majority of global clusters agreed they would like to try to formulate a common statement on the paper and would engage on this in the coming weeks. One GCC mentioned that they would need to check with their CLA on whether they would agree to developing a common stance. A number of GCCs noted it would be particularly important for the letter had the right tone, and if it: welcomed the paper; welcomed the possibility of reforming the structures; and conveyed that the Global Clusters were open to change without necessarily starting from scratch and undoing all the good work that has been undertaken in the last few years. It was agreed the GCCs would submit written inputs to the GCCG-S, which would compile their inputs in order to produce a first draft of a common stance.

AOB

Forward agenda:

Friday, 16 October, 11-12:30 - Regular GCCG meeting

28 October – 2 – 5 pm – (TBC) – Stepping back to look forward: Extended session