

Guidance

CONSOLIDATED APPEAL PROJECT SELECTION AND PRIORITISATION

June 2004

Endorsed by IASC Principals

Guidance for CAP Project Selection and Prioritisation

Endorsed by the IASC WG, June 2004

Introduction

Prioritisation in the CAP refers to the *process of focusing the collective efforts of the humanitarian community on the most urgent assistance and protection needs in a crisis*; i.e. those identified through a participatory and objective needs assessment followed by inclusive and analytical strategy-setting. This process should result in agreement on which projects are required to respond to humanitarian need.

Moreover, donors have been calling for a rigorous process of prioritisation, based on needs assessment and led by UN Humanitarian Coordinators. They have welcomed examples of good practice in the field, such as clear criteria for prioritisation and the establishment of technical-level project peer reviews, to examine organisations' projects during the preparation of consolidated appeal documents and their revisions or mid-year reviews. In May, the Emergency Relief Coordinator again committed to strengthening prioritisation in the CAP.

This note, based on precedent and good practice from a number of countries, provides guidance on how criteria and an inter-agency project peer review approach can be applied for the 2005 Consolidated Appeals.

Assumptions

- a. A Humanitarian Coordinator (HC) or HC a.i. is leading the CAP.
- b. There is, or will be, an Inter-Agency Standing Committee, or a group that mirrors the IASC, at the country level (henceforth called the Country Team or CT).
- c. Well-functioning sector coordination groups are integral to good coordination, and these groups should form the basis of project prioritisation.
- d. Assessment data has been collected and analysed, either through the Needs Assessment Framework and Matrix or similar tool.
- e. Based on the findings from (d), the CT has agreed on the overall priorities for humanitarian response, and sector coordination groups have developed strategies in line with these priorities.

Steps

1. The CT, under the leadership of the UN HC agrees on criteria for the inclusion of projects in the Consolidated Appeal, such as those listed in the CAP Technical Guidelines:
 - a. Sectoral criteria: the appealing organisation's project helps to achieve at least two response plan (sector) objectives, which have been developed to address priority needs.
 - b. Organisational criteria: the appealing organisation has the technical expertise in country, capacity, and mandate to implement the project, or can mobilize this operational capacity as required.
 - c. Demographic criteria: the project will address a priority vulnerable group, as determined by the CT.
 - d. Geographic criteria: the project will be implemented in a region that is considered to be a priority.
 - e. Temporal criteria: the projects can make a measurable impact in the time-frame of the appeal (usually one year).
 - f. Other context-specific criteria: e.g. projects that include a focus on HIV/AIDS; projects that help to build local capacity, projects that promote gender equality.
2. Sector coordination groups each appoint a Chair (if not done already) and a Co-Chair. The Chair and Co-Chair can be from any organisation participating in the development of the sector strategy, but at least one of these functions should be filled by an NGO or Red Cross representative.

Example: There are five organisations working in the water and sanitation sector in country x. The organisations agree that UNICEF should chair the sector coordination group, and OXFAM should co-chair. Alternatively, OXFAM could chair the group.

3. Organisations participating in the CT prepare one-page project sheets according to CAP Technical Guidelines and submit them to the Chair and Co-Chair of the relevant sector coordination group.¹ The projects should address agreed priority needs and support the implementation of specific sector objectives.

Example 1: The health sector coordination group has set three objectives to meet priority needs. Organisations such as UNICEF, WHO, Save the Children and UNAIDS each submit one-page projects to the Chair and Co-Chair of the sector coordination group, WHO and Save the Children. Each project directly supports at least one sector objective.

4. The Chair and Co-Chair of the sector coordination group facilitate the review the project sheets against agreed criteria, and against the agreed sector objectives. Projects that do not meet the criteria and do not support sector objectives are sent back to the authors for revision (bearing in mind clear deadlines) or deletion.

Example: The Chair and Co-Chair of the food sector have received six projects. One of them targets a population group that has not been identified as a priority. The project is removed or returned to its originator with a 24-hour deadline to make an amendment.

5. The Chairs and Co-Chairs of all of the sector coordination groups hold a peer review of the projects that have passed the first review. The aim is to put in place a “checks and balances” mechanism to ensure accountability to the vetting process. The peer review writes a list of recommended projects for inclusion in the Consolidated Appeal (and a brief explanation of why some projects have been removed), and submits it to the HC.

Example: The Chairs and Co-Chairs of all of the sectors (food, health, water and sanitation, agriculture, education and shelter, etc.) meet to review the projects that have passed the first review. In doing so, it becomes evident that some sector Chairs were not as rigorous as others. The group agrees that certain projects do not meet criteria and they are removed.

6. The Humanitarian Coordinator reviews the recommendations from the peer review and decides which projects should be included in the CA document. The UN HC will be held accountable by the ERC for including projects in the Consolidated Appeal that are in line with needs as outlined in the CA document.

¹ The policy on IASC Appeal and Strategy Documents stipulates that the CT may invite other non-IASC organisations, such as UNAIDS and national NGOs, to participate in the CAP and appeal for funds in the appeal.