Global Cluster Coordination Group (GCCG) meeting – 12 January 2022
Summary of discussion and action points

Participants: Ms. Sahdia Khan, Global Shelter Cluster (GSC); Mr. Stefano Fedele, Global Nutrition Cluster (GNC); Mr. Dher Hayo. Mr. Metehan Temurcin, Mr. Bruce Spires, Global Camp Coordination and Camp Management Cluster (CCCM); Mr. Adbul Majid and Ms. Naouar Labidi, Global Food Security Cluster (GFSC); Ms. Linda Doull and Ms. Emma Fitzpatrick, Global Health Cluster (GHC); Ms. Athalie Mayo, Global Logistics Cluster (GLC); Mr. William Chemaly, Global Protection Cluster (GPC); Ms. Jennifer Chase, Gender Based Violence Area of Responsibility (GBV AoR); Mr. Thorodd Ommundsen, Global Education Cluster (GEC); Ms. Monica Ramos, Global WASH Cluster (GWC); Mr. Brent Carbno, Global Emergency Telecommunications Cluster (ETC); Mr. Ron Pouwels, Child Protection Area of Responsibility (CP AoR);. Jim Robinson, Housing, Land and Property Area of Responsibility (HLP AoR); Ms. Marina Skuric Prodanovic (GCCG Chair); Ms. Randa Hassan, Ms. Annarita Marcantonio, Mr. Mate Bagossy, (GCCG Secretariat).

Invitees: Mr. Fran Equiza, Deputy Humanitarian Coordinator for Afghanistan; Ms. Manja Vidic, Head of Office, OCHA Philippines; Mr. Hannes Goegele, OCHA Regional Office for Asia and the Pacific; Ms. Aida Mengistu, OCHA P2P; Ms. Moira Reddick, consultant, IASC secretariat; Mr. Nisar Syed, Chief, UNICEF Global Cluster Coordinator Unit.

Summary of Discussion	Action Points

Ms. Randa Hassan opened the meeting on behalf of the GCCG chair and provided an overview of the agenda for the meeting, which was adopted by the GCCG.
 	
Follow-up on previous GCCG meetings (action points, summary record, etc)
 	
• Ms. Hassan updated the group on the completion status of the follow-up items from the GCCG meeting of 15 December 2021. She highlighted two pending follow up action points:
  o The group needs to agree in who will be the new GCCG representatives in the JIAF, taking over from GWC and GHC. New representatives need to be selected before the JIAF Steering Committee meeting on 17 March 2022.
  o A number of activities included in the 2022 GCCG workplan do not have identified GCC leads. It is important that GCC leads are promptly identified for all the activities.
  o **Madagascar:** There is no decision yet about activating Protection and Health clusters and the local sectors have been asked to continue assessments internally. Both sectors are planning to conduct a CCPM, as currently activated clusters did before their activation.
• GHC informed that is still unsure if a CCPM will be conducted in Madagascar, as of now stand-by support has been offered to the health sector in Madagascar.
• GWC commented that a follow up email would be sent to the GCCG asking for volunteers to represent the GCCG in the JIAF in 2022.
• Ms. Skuric Prodanovic emphasized the need for GCCG representatives to the JIAF to be selected and for GCCs to volunteer for remaining activities of the GCCG workplan where leads had not been identified yet. She also introduced Mr. Thorodd Ommundsen who would be acting GEC coordinator during Ms. Giordano's two-month deployment to Afghanistan.
	1. GCCG-s to initiate consultations with GCCs for the selection of two new GCCG representatives to the JIAF
	2. GCCG-s to liaise with GCCs in order to select GCCG workplan activity leads.

Briefing on the response to Super Typhoon Rai emergency - Philippines
 	
• Mr. Goegele briefed the group about the status of the response to Super Typhoon Rai, that hit the Philippines in mid-December 2021. He highlighted a few key figures:
  o 7.8 million people had been affected by the Typhoon in 11 regions of the country
  o 214,000 people remain internally displaced
  o 1.4 million houses were damaged
  o 86 municipalities remain without electric supply
  o 40 municipalities are experiencing power outages
  o 89 million Ha of crops and 1.2 million Ha of livestock and poultry have been damaged.
• In addition, humanitarian access is challenged by restrictions associated with the rapid propagation of the omicron variant of COVID-19 and recurrent weather disturbances in northern Mindanao and Visayas that will exacerbate already dire conditions for the displaced.
• The Humanitarian Needs and Priorities (HNP) document issued on 24 December 2021 proposed to target 530,000 people in need of assistance and identifies a funding
	Follow up points for the GCCs:
	• Establish contact with cluster leads to identify specific support measures
	• Share good practice/tips on outreach and inclusion with local and national actors
	• Provide support to resource mobilization

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requirement of USD107.2 million, which to date is 19.2 percent funded. The largest funding requirements are for Food Security & Agriculture, Shelter, CCCM, Protection, WASH and Health.	• Provide in-country and/or remote support, in particular on IM.

- The extent and scale of the damage wrought by Typhoon Rai neared the destruction from Typhoon Haiyan, warranting a large-scale mobilization effort. However, the number of fatal casualties had been much smaller than during Typhoon Haiyan. This is largely due to the work on preparedness carried out by national authorities and partners.
- With regard to coordination, the Government of the Philippines is leading response efforts and relevant line agencies have activated government response clusters, noting that these are not clusters in the IASC sense of the term. The Humanitarian Country Team (HCT) is focusing on supporting Government capacity in Caraga (currently in Butuan with a plan to move to Surigao City) and in Region VIII (currently in Ormoc, with a plan to move to Maasin City), at this point there is no intention to formally activate IASC clusters. A number of steps are being considered critical to reinforce the coordination of the emergency:
  o Move coordination hubs to operational hotspots – from regional to provincial
  o Even out operational capacity across sectors and regions; priority clusters include Shelter, Food Security, Health, Protection and WASH
  o Identify additional protection capacity beyond Caraga region
  o Improve staffing levels. Dedicated cluster leads currently wear multiple hats and rotate in and out of affected areas
  o Improve cluster Information management (IM) capacity
  o Revisit humanitarian needs and coordination requirements beyond immediate HNP priority areas.
- Finally, Mr. Goegele thanked the GCCs for their attention and identified the following four areas for possible support by the GCs:
  o Establish contact with cluster leads to identify specific support measures
  o Share good practice/tips on outreach and inclusion with local and national actors
  o Provide support to resource mobilization
  o Provide in-country and/or remote support, in particular on IM.

Discussion
- The Chair enquired about the role that was being played by local actors in the response.
- GNC noted that although nutrition had not been mentioned during the presentation, it should still be considered a priority sector.
- Ms. Vidic confirmed that nutrition remains a priority but is not prioritized in the CERF allocation. She mentioned that the RC/HC had made it clear to UN agencies that at least 25% of funding from the CERF grant should go to local NGOs. In addition, an OCHA emergency cash grant of US$ 100K was being provided to a local NGO to deliver life-saving assistance and also to act as a coordinator of local NGOs. As OCHA was also receiving offers from the private sector, it was putting them in touch with local NGOs. She mentioned it should be kept in mind that many of the local NGOs in the Philippines had up till now been development focused. However, in the response plan there is some strong language on localization being the overarching approach for the implementation of relief interventions. Finally, OCHA was asking the cluster to specifically reflect on activities of local NGOs and report on them.
- GBV AoR said it was sending a regional IMO for three months to support the GBV team in the Philippines.
- GFSC informed that the FSC team in the Philippines is for now able to respond with the existing capacity. If requested, additional support can be provided by the global level.
- CCCM informed that IOM is providing technical support to the government ministries working with the CCCM and Shelter clusters, and offered support if other GCs need reaching out to government partners.

Operational updates	

Ms. Hassan updated the group on the upcoming priorities of the Emergency Directors' Group (EDG):

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• The next EDG mission will take place in Afghanistan from 16-20 January. [Mr. Equiza subsequently clarified that the mission has been postponed to February]. • The EDG annual review of operations is planned to take place in Geneva on 1 February 2022.	
Update on GPC mission to Afghanistan Mr. Chemaly briefed the group on his mission to Afghanistan, where he was on surge to lead the Protection Cluster during the absence of the coordinator. He made the following points regarding the overall context: • The context in terms of laws and policies is very complex. Laws and policies are in place but their interpretation and enforcement is not uniform • The availability of services and quality of the infrastructures is uneven across the country, with the main urban centers and especially Kabul benefiting from considerably more facilities than rural areas • Environmental and climate change associated phenomenon, in particular drought, further aggravate the situation of the population. • Main categories of protection risks include: protection of civilians and physical integrity; access to justice, remedies and mental health; harmful coping mechanisms, and, specific groups at risk. • Operational challenges include: adaptation and relationship with the authorities; looking at a cohesive multi-sector response, including the need for each sector to look at protection dimensions (e.g. the impact of distribution points on beneficiaries); access choices of partners, and local partners and their ability to safely implement programming, especially in more sensitive sectors. • The HCT has high expectations in terms of data collection, which are a heritage of the vast and well-functioning data collection system in place in Afghanistan operated by UNAMA until very recently. However, the network that was in place has quickly disintegrated and while the same quantity and quality of protection data is not available, expectations are still there about having access to such detail. Therefore, capacity building in terms of data and support with information management remain priorities. • Finally, Mr. Chemaly emphasized to rethink localization and the need for stronger coordination at the subnational level, linked with local partners, and asked the Deputy Humanitarian Coordinator (DHC) to advocate for cluster lead agencies (CLA) to have dedicated coordinators and capacity outside the capital. • The Chair invited to DHC to share any reflections he might have. • Mr. Equiza thanked GPC for the presentation and reminded the group that access in Afghanistan was the best it had been in the last 20 years. He agreed about the strategic importance of the information management and data collection. While UN agencies can move relatively freely, he added, the actual delivery of humanitarian assistance remains challenging. • He emphasized that he believes the humanitarian system is as robust as the clusters are, with the strength and capacity of cluster coordinators and IMOs being crucial to the response. The accountability of the CLA representatives in terms of coordination must also be clear and should be insisted on. **Discussion** • GNC shared his concern about the HCT asking to have cluster co-leads, which could lead to diluted accountability and suggest instead assigning specific reinforced roles to national actors. • GFSC noted that the term 'famine' is not being used for Afghanistan despite increasing food security concerns. The Seasonal Food Security Assessment, to be conducted during the peak hunger season, will incorporate questions from other clusters e.g. protection, WASH, etc. IPC datasets will be updated according to the results and enable a better understanding about famine or risks of famine. The Food Security Cluster has a roving coordinator across the country and focal points in several regions. • GBV AoR commented that it has a UNFPA GBV AoR Coordinator, an INGO Co-Coordinator and a local CSO NGO Co-Coordinator, and added that there have been	3. GCCG-s to follow up with DHC on IASC terminology with regard to cluster leadership and localisation

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concerns related to the security of the GBV AoR due to the sensitivities of GBV in the current context. • CCCM said that camp closures are an important topic and that a CCCM WG had been established and was now operational in Afghanistan. • The Chair asked if GPC had specific recommendations on how to further promote localization and capacity-building, keeping in mind that Afghanistan had also had a DFID-supported twinning programme for year. A discussion followed Mr. Equiza asking for clarification on cluster (GNC) co-leadership. GNC clarified that the main objective – as endorsed by the GNC SAG – was to strengthen NGOs role in sectoral leadership and pointed out for the need for clarification of terminology such as co-leadership or co-coordination. • GHC informed the group that is recruiting national staff at the subnational level Afghanistan locally hiring seven sub-national coordinators.	

Briefing on 2022 P2P priorities
 	
Ms. Mengistu updated the group on the P2P missions planned for the first half of 2022 and their focus:
   o **Mozambique:** There is an increased humanitarian capacity that offers an opportunity to reflect on how to organize the response, including how the teams in various geographic locations work together towards common priorities.
   o **South Sudan:** Given the protracted context, the support will help the team review the humanitarian footprint to ensure that it is fit for purpose
   o **Burkina Faso:** The support is likely to have a particular focus on collaboration with development partners towards advancing collective outcomes
   o **Afghanistan**: The Operational Peer Review mission has been delayed and will probably take place on the second quarter of 2022.	

Update on the GCCG ToR
 	
Referring to the final version of the IASC Strategic Priorities (2022-23) agreed by the IASC Principals and shared with the GCCG on 28 December, the Chair brought to the attention of the group three key points that the IASC Principals had requested OPAG to consider and decide upon:
   o The inclusion of a representative of the GRG in the GCCG to strengthen the integration of gender in all aspects of cluster and inter-cluster work
   o Inclusion of a representative of the MHPSS Reference Group in the GCCG to strengthen integration of MHPSS in all aspects of cluster and inter-cluster work.
   o Changing the frequency by which the GCCG would report to the OPAG from 6 months to quarterly
She noted that the status of the GCCG as an associated entity would be reviewed at the end of 2022 and asked if the GCCs had any reflections on these points.
 	
Discussion
• GBV AoR expressed her concern about the language of the IASC note reflecting a top-down approach, while the GCCG's aim must be the opposite, facilitating the work on issues coming from the operational level. The Chair responded that the draft GCCG TOR that had been submitted to OPAG in 2021, had indeed reflected a much more field-oriented approach but had also included issues such as enhancing the application of IASC guidance. She suggested the group might propose to OPAG to retain the originally formulation of the TOR.
• A number of GCCs enquired on whether the suggestions to include GRG and MHPSS representatives was in order to expand their operational footprint / outreach to the field. Some pointed out that neither represented clusters and therefore the question was whether they would be observers or full-fledged members. There was general agreement that they might be best suited to an observer role. The question was also posed whether their integration would provide the GRG with sufficient space to discuss gender issues in detail, give the GCCG's multiple priorities.
	4. GCCG-s to reach out IASC-s and clarify how the IASC suggestions to the OPAG can be taken forward including 1. Retaining original language in the TOR around IASC guidance; 2. Suggesting an observer role for MHPSS and GRG.

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Update on the IASC External Review of PSEA Ms. Reddick briefed the group on the conclusions and recommendations of the IASC External Review of Protection from Sexual Exploitation and Abuse and Sexual Harassment. - Progress immediately after the 2010 Review was slow and this may be because, IASC Members had focused on individual responsibilities initially. The role of the IASC Champion during this time ensured ongoing reporting by members to the IASC. - The purpose of the review was to provide IASC Principals with an independent assessment of progress since the 2010 Review and to consider the impact and effectiveness of the IASC approach to PSEA. - Significant progress has been made since 2010 on the following: standards were endorsed, strategic priorities set and communicated, good practice identified, country level responsibilities assigned and reinforced, the PSEA Network concept formalized, and guidance & tools developed. - Over 75 documents directly informed the report and 159 key informant interviews were conducted, the vast majority of interviews were with staff of IASC members, 80 of these interviews were with field staff and five Network Meetings were organized. Despite nomination by PSEA Coordinators in several countries no cluster leads were available for interview. The key findings of the report were as follows: **Victim centered approach**: The IASC Principals have endorsed a UN led Victim Centered Protocol however across the IASC agencies there is not a global level consensus on how the victim centered approach should apply. Country level staff are often unaware of commitments made or how to implement across a response. The IASC should take collective action to ensure adequate resourcing of GBV services which are not available/accessible to SEA victims/all GBV survivor. Clarity is needed on how the IASC intends to ensure investigations become more victim centered. The report advises consideration of the repurpose of the OCHA Fund for investigations into SEA and sexual harassment. Establishing collective independent investigation capacity in high-risk contexts should be considered in the short term. **Inter-agency community engagement and complaints mechanisms:** The key achievement is that IASC members jointly committed to this inter-agency mechanism over a sustained period of time. However, there is a need for more evidence that community based complaint mechanism (CBCM) guidance is being applied. Concerns include that the model may be too complex to be operationalized among diverse field actors. IASC stakeholders must consider the future of the CBCM as well as the implications of not supporting the CBCM approach. **Leadership**: The key achievement is that HCs/HCTs accept that PSEA is their responsibility. There is shared agreement among HC/HCTs about the relationship between power and SEA and the need for sectoral structural change. PSEA is included in coordination and management meetings at global and country level, however it is not mainstreamed across clusters and sectors and is not a systematic part of surge and scale-up in response to crises. While progress has been made on reference checking, more can still be done. **Sexual harassment:** The key achievement is that leaders at the global level have committed to drive change on this issue. Sexual harassment appears to be a more challenging issue for leaders at country level. Stakeholders need more confidence that humanitarian organizations will be accountable and transparent on sexual harassment as well as on SEA. A sustained effort by senior management across all IASC members will be necessary to prevent and address sexual harassment. - In conclusion, there is a need to move from one year to five-year planning cycle and to establish targets at one, three and five years, as well as to secure predictable funding. The monitoring of progress needs to be done not by increasing process and reporting but by real time monitoring in high-risk contexts. Evidence is needed that the IASC approach and models lead to change and should be made mandatory in every humanitarian context.	5. Ms. Reddick to consult with GCCs individually or collectively about how to frame more specific recommendations in relation to clusters.

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Discussion • GHC commented that the Health cluster is part of the PSEA Network and asked what clusters can do individually and as a group to mainstream this. The Chair also asked how recommendations related to clusters can be made more specific. Ms. Reddick pointed out that PSEA coordinators in the field are seldom invited to ICCG meetings in the field or invited to contribute to the design of inter-cluster assessment mechanisms. Unless they have been in place for a long time they are rarely asked to engage with cluster or sectoral work. An additional challenge is that PSEA coordinators rarely have long-term contracts which means there is frequent turnover. She added that a multi-year proposal for action will be put together and shared with the Principals or the Deputies. • Ms. Cue added that there is ongoing advocacy at the IASC Principals level and work to complement existent high-level guidance with tools for practical implementation. Field missions had been conducted in several locations where case management issues were identified and had looked at how PSEA coordination can be integrated into the humanitarian coordination structure, especially in operational hubs and at subnational level, where responsibility for implementing the PSEA action plan could fall under the regional ICCG. • It was agreed that it would be useful if Ms. Reddick could follow up with GCCs individually and as a group, to help with the framing of more specific recommendations. If useful, a follow up GCCG session may also be organized towards the end of this process.	
AOB • **Coordination mapping:** Ms. Hassan informed the group that testing of the online platform is being finalized and the launch of the mapping expected during the third week of January. Contact details of field focal points receiving the survey will be shared with GCs. • **Ethiopia:** Following up on a previous action point about a possible GCCG mission to Ethiopia, Ms. Marcantonio said that GCCG-s would get in touch with the OCHA office again to enquire if this was still possible, given security risks and bureaucratic impediments. She also outlined a few of the top priorities which included negotiating access. The Chair suggested to have a dedicated agenda item on Ethiopia during the next GCCG meeting. HLP AoR informed the group that the authorities' suspension limiting Norwegian Refugee Council activities in Ethiopia had been lifted. GBV AoR added the AoR in Ethiopia is now led by a full-time coordinator. • **Upcoming GCCG meeting:** Wednesday 2 February 2022, 2 – 4 p.m. (GVA) **Forward agenda:** Activation/deactivation, IASC Protection Policy Review, South Sudan P2P follow up, Madagascar, Afghanistan.	