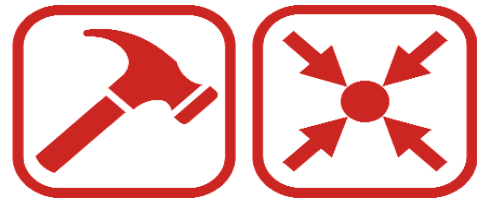
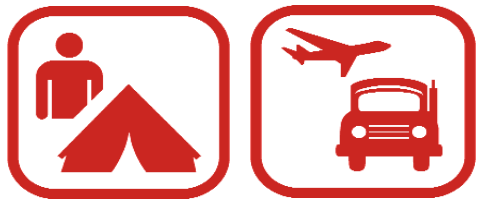


early recovery



FINAL DRAFT

2010 – 2011

Early Recovery

Inter-Cluster Action Plan

Contents

EXECUTIVE SUMMARY	3
Problem Statement	3
Methodology	4
Main findings and recommendations	5
2010 – 2011 EARLY RECOVERY INTER-CLUSTER ACTION PLAN	6
Contacts	14
Appendix	15



Problem statement

Unlike other clusters covering more traditional sectors, Early Recovery is seen as a relatively 'new' area of work. The **Cluster Working Group on Early Recovery** (CWGER) was established following recommendations stemming from a review of the global humanitarian system, undertaken by the Inter-Agency Standing Committee (IASC) in 2005. This review identified a gap of unmet needs following crises, during the transition period from relief to long-term recovery that the CWGER aims to address. UNDP has been given the responsibility to lead the CWGER which sits at the nexus of humanitarian and development communities.

The first Early Recovery cluster was set up in Pakistan in October 2005. Learning from this experience, the CWGER primarily focused its work on building global capacities for a predictable support for early recovery at country level, and improving the guidance, tools, and back-up required by humanitarian/resident coordinators and humanitarian country teams at the country level. Building on the momentum generated, the CWGER concentrated its efforts on improving early recovery strategic planning and coordination at country level. The aim was to scale up the global support to early recovery, in order to systematically meet an over-increasing demand from countries affected by conflicts or natural disasters. The CWGER has provided support to country teams in more than thirty countries where the cluster approach has been rolled out, and in several other countries in crisis.

In the course of 2009, the CWGER proposed to take stock and document these experiences through a **Lessons Learned Exercise**. The intention was to further learn from experience; to improve early recovery coordination mechanisms in particular early recovery networks and clusters, in response to future crises; and to enhance the way the global CWGER organizes itself to provide support to governments and country teams.

Meanwhile, **the Cluster Approach Evaluation, 2nd phase**, was also conducted in 2010 to assess the operational effectiveness and main outcomes of the cluster approach to date and to develop recommendations on how it can be further improved. It drew on six country studies and on global and regional interviews, a survey among humanitarian actors, as well as literature and document analysis¹.

It is recognized at global level that the early recovery approach consists of three main entry points during the humanitarian phase:

- The inter-cluster needs assessment, strategic planning and coordination of early recovery
- The programmatic mainstreaming of early recovery in the humanitarian response through the work of each cluster, which also implies that cluster lead agencies coordinate and integrate their programmes according to the joint sector plans and do not concentrate their response within the cluster they lead²
- The gap areas relevant to the crisis addressed by a specific cluster led by UNDP (e.g. Community Restoration in Pakistan).

The Cluster Approach Evaluation 2 and the CWGER lessons learned exercise both underlined that the concept of early recovery remains elusive and complex wherever these three fundamental aspects are not implemented, in particular in crises where both the cluster and inter-cluster coordination mechanisms are named 'early recovery'.

¹ See Appendix 8

² E.g. UNDP projects should be integrated in the response plans developed both by the cluster led by UNDP and in the other relevant clusters

At the meeting of the Inter-Agency Standing Committee 75th Working Group (IASC-WG) held in November 2009, the CWGER presented on progress by all global clusters to integrate early recovery into their assessment, planning and implementation. The CWGER worked closely with other clusters to **mainstream early recovery** throughout their work at both country and global levels. The joint efforts to mainstream early recovery throughout the humanitarian response have gained stronger momentum, at both global and country levels. Perhaps most importantly, the awareness of the fundamental notion that early recovery is not 'just' the CWGER's business, but a priority for all is steadily growing. Early recovery is progressively being integrated into policy guidelines, training material and various important processes, including in needs assessment methodologies and frameworks.

As the pace is uneven, with some clusters making more progress than others and some countries advancing faster than others, the IASC-WG requested that this work be further strengthened through a more structured dialogue and joint planning, by which the global CWGER supports Global Clusters in identifying incremental mainstreaming targets, spelling out their mutual commitments and periodically review progress in an agreed **Early Recovery Inter-Cluster Action Plan**.

In June 2010, UNDP's Bureau for Crisis Prevention and Recovery (BCPR) in its capacity as CWGER cluster lead, organized a **Global Workshop on Improving the Mainstreaming and Coordination of Early Recovery**. The workshop aimed to develop an early recovery approach relevant to serving the needs of populations affected by crises, on the basis of the findings of the CWGER Lessons Learned exercise and the Cluster Approach Evaluation 2.

Methodology

The **Early Recovery Inter-Cluster Action Plan** was developed during the workshop, which was structured in two phases:

- | | |
|----------------|---|
| Phase 1 | During the initial three days UNDP/BCPR staff related to the CWGER joined a select invited group of ten Early Recovery Advisors (ERAs) to: |
| | <ul style="list-style-type: none"> (i) Analyze the results of the CWGER lessons learned exercise and propose concrete recommendations of actions to improve coordination (ii) Provide recommendations for the development of a Field Handbook (iii) Provide inputs for the revision of the CWGER Guidance Note |
| Phase 2 | During the subsequent two days, ten Global Cluster Leads' representatives joined the initial group and participated in activities and discussions which serve as a basis for the development of the Global Clusters Early Recovery Joint Action Plan. In particular they: |
| | <ul style="list-style-type: none"> (i) Identified Early Recovery elements in the work of the IASC clusters (ii) Clarified IASC clusters' roles and responsibilities to improve country level coordination in the Early Recovery process (iii) Identified opportunities for joint country support |

Main findings and recommendations

In general, the participants to the Global Workshop on Improving the Mainstreaming and Coordination of Early Recovery were impressed by the range of early recovery initiatives undertaken by the global clusters and the ***general consensus was that a more coordinated effort across clusters and agencies would yield even greater results*** than independent agency or cluster initiatives.

The ***key challenges facing early recovery were identified as a lack of resources, disputed or unclear early recovery concepts, lack of connection with national processes and clarity regarding UNDP and other agencies' roles, and subsequent poor coordination.***

Discussions concluded that the three key tasks to address these challenges are:

- I. **Build UNDP's Country Offices capacities through awareness raising on the cluster approach, early recovery coordination training and the allocation of dedicated ER capacities**
- II. **Support Humanitarian/Resident Coordinators in leading the transition from humanitarian to national-led recovery and development**
- III. **Create an interagency/inter-cluster early recovery coordination platform at global, country and local levels**

2010 - 2011 Early Recovery Inter-Cluster Action Plan

Recommendations and action points stemming from the review of Interview and Survey Findings and the Cluster Approach Evaluation 2:

1. ER conceptual clarity and overall guidance to be enhanced

There is a need to review and rethink the architecture to ensure greater levels of ownership and clarity on the role of members and cluster. While significant advances have been acknowledged across the board on the progress of coordination at the global level, there is still concern that the current architecture of the inter-agency global coordination is not working sufficiently well to meet the emerging circumstances. The concerns include whether the current global level cluster architecture is, at this point, the most appropriate and effective mechanism to move forward and mainstream the early recovery approach in the next 3 to 5 years.

The concept of early recovery is still elusive and complex. For agencies with a strong sectoral focus, early recovery is too broad and does not sufficiently reflect their inputs. For others, the concept is not sufficiently grounded on key development principles that define the approach.

ACTION POINTS:

- **Develop an option paper on a global ER architecture (including revising cluster name and creation of a global ER inter-cluster support unit), and present to IASC for endorsement.**
CWGER
- **Clarify/simplify ER concept as a mainstreamed and coordinated approach**
ALL, CWGER
- **Revise the Early Recovery Guidance Note**
CWGER
- **Develop an ER handbook based on practical operational tips**
CWGER
- **Create inter-cluster open spaces for exchange and good practice**
CWGER

2. ER priorities to be adequately identified

There is a need for consistent high-level support and leadership from headquarters and from the HC/RC in the assessment and planning processes in order to ensure that early recovery is seen and owned by the entire system in country. This is perceived as critical in order to avoid questions of the legitimacy of the process (including UNDP's role) being raised and to give the early recovery architecture, the needs assessment process and the follow up activities a clear IASC or UNDG systems, rather than agency, leadership.

The differentiated needs assessment tools and planning frameworks used by agencies continues to hamper common approaches and the willingness of members to adapt responses, as there are no "common findings". The range of "parallel processes" has contributed, at times, to an overload of data and a lack of clarity on whose/what data should be used for what purpose. It has also generated different understandings of key problems and priorities.

ACTION POINTS:

- **Draft a paper on multidimensional needs assessment and implications for Early Recovery for new ERC and UNDP administrator**
OCHA, UNDP, CWGER
- **Unblock and reenergize ER PCNA process by a) finalizing the IASC ER prioritization framework for conflict and post-conflict situations and b) pursue discussions with DOCO on integrating into PCNA methodology**
CWGER
- **Strengthen the engagement between cluster lead agencies, clusters and the PDNA teams at country level**
ALL, HC, ERA
- **Clarify ER perspective in all needs assessments at country level and agree on key ER indicators to be incorporated across clusters**
ALL, CWGER, NATF
- **Reduce, merge and coordinate number of assessments and missions**
HCT, ICCG
- **Reinforce importance of transparent and realistic capacity analysis in existing ER assessment tools**
ICCG, OCHA

3. Inter-cluster joint strategic planning to be systematically undertaken

A complete and holistic response for affected populations requires a) strong partnerships based on capacity rather than on mandates, b) shared analysis based on identified needs and priorities which will inform joint planning; c) a meaningful transition to national ownership and the re-empowerment of development processes, and d) building on the capacities, knowledge and experience of local communities in line with the existing principle of national ownership.

There is broad agreement on insufficient government ownership with a few notable exceptions. There is a need to bring the early recovery approach on board in national and agency planning processes prior to a crisis. For example, through contingency planning, preparedness planning, disaster risk reduction and conflict prevention to avoid having to “sell” early recovery in the heat of the crisis.

ACTION POINTS:

- **Adopt the ER strategic framework and joint action plans as standard tools in a crisis situation**
CWGER, IASC
- **Clarify and make specific UNDP's and other stakeholders' roles and responsibilities (clusters, government, donors, communities) in the revised early Recovery guidance note**
CWGER, ALL CLUSTERS
- **Develop guidelines to ensure that ER is included in contingency planning**
IASC CP-SWG, CWGER
- **Advocate for inclusion of ER into disaster preparedness and conflict prevention plans**
ALL, CWGER
- **Develop guidance on ER exit strategy across all clusters and on transition to recovery and development**
CWGER, ALL CLUSTERS

4. ER programming to be mainstreamed ,integrated and initiated at the local level

An early recovery response must of necessity begin at the local level. It is at this level that the impact of the crisis is more readily felt and it is the stage at which a more effective interplay with humanitarian actors can take place. Early recovery responses both in terms of coordination and specific programmatic interventions would need to be supported and strengthened at this level and at the same time, linkages for longer term national planning and policy formulation can begin within this context.

There is a need to identify and bring coherence to the processes that will lead to the development of a local level early recovery response and including the different coordination and programming components that may be essential for an effective inter-cluster response.

Global clusters are committed to integrating early recovery into their assessment, planning and implementation. However, the pace is uneven, with some clusters making more progress than others and some countries advancing quicker than others. More effort should be focused on creating ownership and action by “mainstreaming” across country clusters so that it is understood and implemented by everyone.

ACTION POINTS:

- **Finalize guidance on Local Level Early Recovery in consultation with other clusters**
CWGER, ALL CLUSTERS
- **Define the ER strategic approach for each cluster; define building back better for their sector; and include benchmarks on ER mainstreaming in other clusters' monitoring systems**
ALL CLUSTERS, CWGER
- **Develop a checklist of ER criteria and/or activities for each cluster - Create minimum standards**
ALL CLUSTERS, CWGER
- **Develop policy guidance on mitigating negative impact on relief activities (Do No Harm)**
ALL CLUSTERS, (focal point?)

5. Capacity for coherent ER country leadership and coordination to be strengthened

There is a need for consistent high-level support and leadership from the HC/RC in the assessment and planning processes in order to ensure that early recovery is seen and owned by the entire system in country. This is perceived as critical in order to avoid questions of the legitimacy of the process (including UNDP's role) being raised and to give the early recovery architecture, the needs assessment process and the follow up activities a clear IASC or UNDG systems, rather than agency, leadership.

In many situations, there is a persistent lack of clarity of roles and responsibilities between the coordination and the advisory functions. The role of the early recovery coordinator and adviser, if assumed by a single person, was seen as problematic as both advisory and coordination functions may suffer. Coordination, in the opinion of many, requires high quality, dedicated capacity to ensure continuity and enhance trust. Given the many demands on the cluster coordinator, it was felt that the inter-cluster advisory dimension has been particularly weak and not sufficiently prioritized i.e. "Inter-cluster coordination tends to be under-serviced in favour of support to the Cluster mechanism".

ACTION POINTS:

- **Strengthen ER leadership and policy guidance in the HC and RC ToRs**
IASC, UNDP, OCHA
- **Develop templates for inter-cluster ER coordination platform and ensure ER inter-cluster dimension is included in guidance on inter-cluster coordination at country level**
CWGER, OCHA
- **Strengthen ER mainstreaming and coordination by replicating ER network and coordination mechanism at local level as appropriate and provide adequate support**
HC, ERA, ICCG, CWGER
- **Clarify roles, responsibilities, and modus operandi of ER network**
HC, ICCG, ERA
- **Improve ToRs (including exit criteria) for ERA and Cluster Coordinator**
CWGER, GICCG (for ERA)
- **Improve, endorse, and roll out ERA training and induction programmes for HC/RC, heads of agency, donors and national partners, and link to other ongoing cluster/inter-cluster field support initiatives**
OCHA, CWGER, ICCG, HCT
- **Integrate ER in cluster training programmes and materials and vice versa**
ALL, CWGER
- **Explore opportunities for co-leadership of country cluster with NGOs and identification of instances of co-chairing of ER**
HC, ERA, CWGER

6. Global inter-agency support capacity to be strengthened

There is support for recommending the establishment of a different global ER coordination and country support modality to increase outreach and improve accountability. Examples include, inter alia, an inter-agency team on early recovery as opposed to an Early Recovery Team entirely staffed by UNDP.

Selection, recruitment and deployment of early recovery personnel, should be reviewed and opened to other agencies, and strengthened - including strengthening the criteria for the selection of inter-agency ER Advisors and Cluster Coordinators - to bring individuals with greater experience.

ACTION POINTS:

- **Create a global inter-cluster mechanism to support HC/RC, HCT and ER networks**
CWGER
- **Increase global country support capacity by manning a Global Early Recovery Inter-Cluster Support Unit with staff from across the UN system, INGOS, member states, donors**
CWGER
- **Revise ER deployment mechanism and procedures and broaden ER roster to CWGER member agencies and other clusters**
CWGER
- **Identify and empower ER champions for strengthening standing and stand-by capacity**
CWGER
- **Create an ER community**
CWGER

7. Information Management, Communication and Advocacy to be strengthened

At the country level, the key issue was the need for more timely and strategic use of information. Examples were cited of meetings being too often taken up with extensive reporting and sharing of information that failed to focus on how it could be used in a strategic manner to help make decisions. The speed and availability of information at the earliest possible stage in the crisis was also considered critical and was linked to the need for greater agreement on common IM standards and tools that are in use.

Monitoring impact and solid reporting with agreed indicators and standards of adherence was considered very weak and neglected and there were insufficient efforts to capture and share lessons learned.

ACTION POINTS:

- **Develop a global ER communication strategy**
UNICEF, UNHCR, NGOs, CWGER
- **CWGER to agree on common information analysis procedures**
ALL, OCHA
- **Identify and empower ER champions**
CWGER
- **Develop ER communication strategy including basic crisis messaging**
HC, ICCG, ERA
- **Educate development actors on ER**
ALL, CWGER
- **Develop approach to address ownership and resistance to change and use UNDP to advocate with national authorities for the integration of early recovery into government structures**
TBC

8. Predictable funding for early recovery to be improved

Funding for early recovery continues to be an issue of concern. Misconceptions of early recovery have framed it as a short-term phase between response and recovery, which has resulted in funding gaps and loss of momentum and trust. The funding of early recovery is an area for renewed strategy and advocacy with the humanitarian and development donor communities.

The various funding mechanisms (e.g. CAP appeals, Flash Appeal) need to be adapted for early recovery or a standalone early recovery appeal created. An overall shift is needed from a focus on immediate/short-term funding for hard deliverables to a more coherent longer-term people-centered approach and focus on supporting institutional change and building capacities.

More efforts are needed in developing joint funding strategies to avoid competing for existing resources. There is a demand for open discussion within the community, and with donors to clarify positions on funding for early recovery at the global level.

ACTION POINTS:

- **Advocate that development funding comes forward in the humanitarian phase**
HFTF, OECD DAC, GHDI, CWGER
- **Finalize the criteria for the integration of ER into CAPs**
HFTF, UNDP
- **Conduct a joint cost-benefit analysis/value for money of ER (including assessment of value added of ERA/CC global network)**
ALL, FP-TBC
- **Encourage government to invest in ER as its prime responsibility and create capacity to respond to their people's needs**
HCT, ERA, HC
- **Develop joint inter-agency and cross-cluster funding strategies (based on ER strategic framework and action plan)**
HC, HCT, ERA
- **Ensure ER Advisors and humanitarian country teams are aware of funding mechanisms for early recovery**
ALL CLUSTERS, CWGER

Contacts

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early recovery

Inter-Cluster Action Plan

APPENDIX



Appendix 1	ER Coordination Lessons Learned Exercise: Main Recommendations	14
Appendix 2	Cluster Approach Evaluation 2: Synthesis Report, April 2010 -References to Early Recovery	15
Workshop on Improving the Mainstreaming and Coordination of Early Recovery		
Appendix 3	List of Participants	18
Appendix 4	Group discussion: The Perspective from the Global Cluster Leads VERBATIM	19
Appendix 5	Group responses to three World Cafe questions	29
Appendix 6	Rules of the Game and Action Points arising from the group work	32
Appendix 7	Suggested outline of an ER Field Handbook	36
Appendix 8	Suggested revisions to ER Guidance Note	39

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Appendix 1 ER Coordination Lessons Learned Exercise: Main Recommendations³

- i. At country level, responsibilities (support to the system, support to the cluster, support to UNDP programmes), and reporting lines (to the RC/HC, the UNDP CD, the Team Leader) - need to be reviewed, delineated, better managed and made more transparent.
- ii. The strong leadership from the HC/RC is important to redress the necessary balance between coordination and advisory functions and ensure greater levels of mainstreaming as the cluster coordination functions can, at times, take over or subsume the advisory functions of early recovery in a crisis.
- iii. Linked to this is the issue of re-naming the 'Early Recovery Cluster' to clarify what is most often done in practice i.e. Community Restoration (CoRe, Pakistan), or Governance, Infrastructure and Livelihoods (GIL, Uganda). This will focus the scope of the coordination of recovery areas not covered by the other clusters.
- iv. At global level, there are opinions, debates and proposals for the active development of alternative models to the CWGER, which merits further consultation and discussion. One recommended way forward is the creation of a "Global Early Recovery Inter-Cluster Support Unit" that might be an inter-agency mechanism mandated to innovate and support inter-cluster coordination and move beyond a focus of inter-agency coordination (CWGER). Coordination and technical support staff could be drawn from across the UN system, INGO's and donors with the goal of enriching the Early Recovery approach and support to recovery programmes with a variety of expertise and networks of contacts. This unit is seen either as a complement or an alternative to the existing global cluster.
- v. Selection, recruitment and deployment of early recovery personnel, should be reviewed and strengthened including strengthening the criteria for the selection of inter-agency ER Advisors and Cluster Coordinators to bring individuals with greater experience on the political dimensions of coordination.
- vi. There is a critical need to consolidate and synergize assessment processes and tools for early recovery purposes.
- vii. Capacity development is an area that needs strengthening including building capacity of the UN system (as a system) at field level.
- viii. Formally develop an "Early Recovery Community" to keep expertise engaged and to grow the early recovery knowledge bank.
- ix. Consider the development of joint funding strategies to address mainstreaming, coordination and programming needs and consider the development of a UN system-wide instrument for early recovery funding.

³ CWGER Early Recovery Coordination: Lessons Learned Exercise – Report 2010

Appendix 2 Cluster Approach Evaluation 2: Synthesis Report, April 2010 - References to Early Recovery

Evaluations of the Cluster Approach

In March 2007, the Inter-Agency Standing Committee Working Group (IASC WG) endorsed a two-phased approach to the external evaluation of the Cluster Approach. Phase one, finalized in 2007, focused on process indicators, the achievements and limitations of the Cluster Approach and lessons learned related to its roll-out.

The Cluster Approach Evaluation Phase 2 was conducted between June 2009 and March 2010 under the leadership of a newly established Steering Group: The Cluster Evaluation 2 Steering Group (CE2StG) comprised mainly evaluation specialists from a wide range of IASC members, UN, Red Cross Red Crescent and NGO, and in addition 5 member states. The Cluster Evaluation 2 Steering Group selected the joint team of Global Public Policy Institute (GPPi) and Groupe Urgence, Réhabilitation, Développement (Groupe URD) to conduct the evaluation.

Based on the mandate given by the IASC WG, the Cluster Phase 2 Steering Group defined the overall objectives of the Cluster Approach Evaluation Phase 2, which was set out to assess the “operational effectiveness” of the Cluster Approach with a focus on country level outputs and outcomes:

- Assess the main outcomes of the joint humanitarian response at country level, with particular reference to the role of the cluster approach and other components of the humanitarian reform process
- Assess the overall operational effectiveness of the cluster approach (including the role of the Global Clusters) in facilitating and supporting the coordinated joint humanitarian response at country level through an analysis of common country-level findings

The overall conclusion of the analysis is that, to date, the benefits of the cluster approach in terms of their functioning and direct results and effects have already (slightly) outweighed the “costs” and that there is potential for clusters to further strengthen coordination and improve effectiveness.

Clusters have already helped to improve coverage of humanitarian needs, identify gaps in the response, reduce duplications and provide more predictable leadership and improved partnerships. Their potential future benefits include the further strengthening of the “coordination platform” and inter-Cluster coordination as well as inclusiveness of national actors leading to better assessment of needs and in finality to an improved response.

Key problem areas identified include poor cluster management and facilitation, exclusion of local actors and potential conflicts with national coordination efforts as well as limited integration of multi-dimensional and cross-cutting issues. The lack of clear guidance from the IASC and the political level on activation and exit strategies for clusters, the interplay between clusters and financing mechanisms as well as integrated missions were also found to undermine effective coordination.

References to Early Recovery

- “In some cases, *coordination meetings were held irregularly* or not at all, as in the case of the *Early Recovery Cluster in Uganda...*” Page 28
- “Cases likethe *Early Recovery Cluster coordinator* in the *oPt*, who emphasized *the crucial support they received from the global level*, are the exception rather than the rule.” Page 32
- “*Overlaps between clusters persist*, such as... *livelihoods activities covered by Good/Food Security/Agriculture and Early Recovery respectively.*” Page 36
- ““Several clusters, including CCCM, Protection and Early Recovery are thematically defined in such a way that they *overlap with inter-cluster coordination.*” Page 36
- “The *Early Recovery Cluster*, finally, has assumed the role of a “gap-filling” cluster and has *in some cases fulfilled a valuable inter-cluster role by identifying inter-cluster gaps*. In Haiti, for example, the Early Recovery Cluster created a much appreciated task force on street cleaning and in the oPt it organized a strategic inter-cluster workshop. In most cases, however, there was little to no follow up on these issues because the Early Recovery Cluster lacked the necessary capacity and mandate.” Page 37
- Little coordination of needs assessments: “the *Early Recovery Cluster has developed a similar method* (Post Conflict Needs Assessment from UNDG and the World Bank) and is *currently developing the early recovery module of Post-Disaster Needs Assessments.*” Page 49, under 5.4
- “Protection of Conflict-Induced IDPs: Assessment for Action (developed by Early Recovery/Protection Working Group in 2008)” Page 49
- Under 5.5 *Enhanced coherence*: “The *Early Recovery Cluster* in the *oPt* led a *Rubble Removal Task Force in Gaza* and successfully developed a common operational plan for involved partners.” Page 51
- Under 6.2 Minimal integration of cross-cutting issues: “the early recovery advisory function in the oPt strengthened awareness of early recovery issues.” Page 57
- Some clusters, namely *Early Recovery* and to a lesser degree Protection, have *both a coordination and an advisory function* that serves to mainstream their thematic areas into other clusters. In the case study countries, they typically prioritized cluster activities over advisory functions... *This often leads to a neglect of mainstreaming issues...*” Page 58
- Table 4 Future potential benefits and risks: “Coordination platform used to a) strengthen focus on early recovery and other cross-cutting issues...” Page 74
- **Systemic obstacles** to the functioning of the Early Recovery and Protection Clusters.... The Early Recovery and Protection Cluster face systemic challenges that hamper their ability to work effectively Page 76-77:
 - **Mandate problems**: “...irresolvable debates concerning their scope and mandate.... For early recovery, broad agreement exists on early recovery as a crucial cross-cutting issue requiring increased mainstreaming efforts. At country and sub-national level, however, early recovery is also often implemented as a cluster addressing gaps left by the other clusters, such as governance, livelihoods, environment, infrastructure etc. The cluster activities have tended to deflect attention away from the advisory role on early recovery.... Can create

overlaps with the work of other clusters and raise questions concerning the mandate of the Early Recovery Cluster.”

- **Lack of expertise:** “few other actors at field level have relevant knowledge and expertise related to these issues.”
- **Political issues:** “Humanitarian actors are... often reluctant to share relevant information on political issues... Similar issues can arise in the context of the Early Recovery Cluster, when UNDP as cluster lead organizations has strong links to governments that are actively involved in conflicts or to integrated missions and peacekeeping forces.”
- **Recommendation 6:** “*Ensure that the Early Recovery Cluster at country and sub-national level focuses on and enhances its advisory function.* This could involve increasing the seniority and level of experience of early recovery advisors, including early recovery into the terms of reference of other cluster coordinators and strengthening their training on this issue. Specific inter-cluster gaps should be addressed by ad hoc task forces or working groups rather than one overarching cluster. (Early recovery Cluster, Humanitarian Country Teams, Inter-Cluster Coordination Fora)” Page 89

Appendix 3

Global Workshop on Improving the Mainstreaming and
Coordination of Early Recovery

List of Participants

Name	Cluster/Sector	Agency
Richard Trenchard	Agriculture	FAO
Nyanjagi Ally	CCCM	UNHCR/IOM
Charlotte Lattimer	Education	Save the Children
Naline Nippita		UNICEF
Surendra Panday	Emergency Shelter	UNHCR
Esteban Leon		UNHABITAT
Tom Delrue	Environment	UNEP
	Gender	UNFPA
Ema Fitzpatrick	Health	WHO
Leo Kenny	HIV/AIDS	UNAIDS
Jane Muyundo	Logistics	WFP
Leonard Zulu	Protection	UNHCR
Blerta Aliko	WASH	UNICEF
Louise Naule	Nutrition	
Ben Mountfield	ERA	
Christophe Legrand	ERA	
Hidayat Ullah Khan	ERCC	
Jane Mocellin	ERA	
Jean Baptiste Nkusi	ERA, PDNA-PW	
Mikkel Trolle	ERA	
Monica Trujillo	PDNA/PCNA	
Nicole Rencoret	ER IMO	
Rekha Das	ERA	
Richard Snellen	ERCC	
Savitri Bisnath	ERNA-Co-W	
Steven Smith	ERA	
Jennifer Worrell	Chair CWGER	UNDP
Jahal de Meritens	Coordinator CWGER	UNDP
Pierre Bessuges	Field Advisor CWGER	UNDP
Dijana Duric	KM Specialist	UNDP
Ivan Draganic	KM Specialist	UNDP
Puji Pujiono	NA Specialist	UNDP

Appendix 4 Group discussion: The Perspective from the Global Cluster Leads VERBATIM

The group discussion was anchored around the three following questions:

- 1) What should be done to best address the challenges in the lessons learned?
- 2) What are the 3 most important tasks for UNDP (in its ER coordination role) to undertake in light of the feedback received?
- 3) Which other bodies should be involved/ take leadership in addressing the challenges that have been identified?

This session covered inputs regarding three aspects, as follows:

- 1) Progress to date: what have you done in mainstreaming ER into the work of your cluster, from your viewpoint of Cluster Lead
- 2) Challenges and concerns:
- 3) Opportunities from your perspectives for mainstreaming and how we can grow this

Progress to Date in Mainstreaming ER in the Clusters

Health cluster

- We have mainstreamed ER at global and local levels
- ER is part of Health CC training for the Health Cluster coordinator
- We have specific guidelines on health recovery , which are currently being revised
- ER is in thought in the Health Cluster Guide and part of the country level response
- We have dedicated headquarters staff to support recovery strategy development at country level

UNICEF

- We have embraced an ER approach, it's integrated into the Core Commitment for Children (CCC)
- our Recovery & Risk Reduction unit has capacities in risk reduction; it's our intention to work on ER within this context
- more and more, as emergencies and crises come, we are making an effort to make a deployment of ERAs as well as in the country structure
- in our Cluster specifically, we are:
 - 1) Identifying best practise re: ER mainstreaming
 - 2) Identifying areas where UNDP has advantages

3) Have a matrix on roles & responsibilities (WASH)

Education cluster

We don't have an ER module but it's included in our training programmes

- we are training of Ministry of Education representatives and early responders
- we're about to finalize a Needs Assessment toolkit, which addresses immediate gaps
- but also, we're looking at recovery needs, including ER
- a Cluster Coordinator Handbook has just been published, where ER is mainstreamed throughout
- This week, the INEF Minimum Standards were published; these standards are the backbone of the work of the Education Cluster
 - this goes beyond emergencies to look at recovery and preparedness (assessment of needs, planning the response)
- With respect to information management, we are conducting a scoping project, which looks, amongst other things, at the transition and handover of IM systems; whether they're compatible with national systems, if there's capacities in place locally to take these on in a handover
- We are starting out on a series of cluster case studies of integrating ER into education programming; the topics may include: working with national authorities, handover and transition of education....
- Can share actual examples (e.g. from Haiti)

Agriculture cluster

- FAO is the lead agency; at the corporate level, we've made transition – there's now a strong ER component
- Transition programming guidelines incorporate ER into our response
- We have tools developed through the ER cluster, with ILO; ER is part of our needs assessment package

Global Food Security

- WFP and FAO are now heavily engaged in the preparatory process to explore and establish Global Food Security Cluster
- We made sure that ER is part of the cluster from the very start; we will share some internal working principles, based on how other agencies have done ER and not done it
- Re: ER Network and how we engage with the ER cluster, we will start the conversation on areas of complementarity – livelihoods is a key point
- We sent one of our Food Security Country Level Cluster Coordinator from Darfur, to be on a CWGER training; we got positive feedback from our people about doing this

Logistics cluster

- For Logistics, ER is a relatively recent discussion
- We represent a large number of organisations and therefore it will take some time to get everyone on board; we haven't done very much with participants but we've started a 1:1 dialogue
- We've now identified a focal point within the cluster, to facilitate discussions with our stakeholders
- When we look at the work we do in emergencies, the ER elements are easily identifiable, e.g. we help identify bridges, roads, for repair & rehabilitation
- We are trying to get our stakeholders on board and at the same time, we are identifying ER opportunities in Logistics and opportunities for mainstreaming Logistics into the different organisations
- The Logistics cluster invited CWGER to make a presentation in the Global Logistics Cluster Meeting

Shelter cluster

(UNHCR, IFRC are involved and there are two parts: normative part + risk mapping)

- - we produce many products that are mainstreaming ER into the shelter
- - in 2008, there was a comprehensive review that looked at what happens after disaster (in terms of months & years); how can we monitor and report on that, and create accountability for that
 - we're going to have an annual communication about this
- We also produced a needs assessment tool, we're trying to incorporate Shelter and ER indicators, knowing that we'll be there not for months/weeks but actually for a more permanent situation
- We created a Shelter & Recovery Advisor who is included in a team of 4; this person's function is to look at the long-term implications of shelter in a more permanent situation
- There's an Advisory body sitting next to the ER cluster in the country
- We're trying to mainstream into 3 clusters: protection
- Contingency planning
- We've implemented a programme in 3 cities: risk map; start engaging where is the response, identifying where we can put the shelter for emergency, transition, permanent housing
- We've mainstreamed ER into land issues; just 2 days ago, we printed a brochure
 - we're bringing land issues into the Shelter cluster, as part of our long-term view

Environment

(UNEP is a focal point for this cross-cutting issue)

- This cross-cutting issue has been in place since last year
- We try to avoid that humanitarian issues are adding onto environmental impacts, which often create irreversible consequences that affects livelihoods and the actual resources needed to recover
- There's a natural link with ER
- So far, we've published a document with the key issues that the people working on ER should know (this captures the do's, don't's)
- We've developed a 1-day training module on ER and Environment; piloted during a recent training
- With this, a CD-Rom will be published in the next month (i.e. end July 2010) with the key tools & guidance, as well as ToT toolkit, which will be available in the next month; everyone can have the material (including the presentations) to run that training (available in 1 month)
- Establishing an online information-sharing platform, that will enable you to find, per sector and per cluster; this includes tools, guides, best practices (available in 1 month)
- In Haiti, we deployed several experts; this was first time that Environment was brought in, to support ER
- It's not only a question of mainstreaming ER into Environment, it's about mainstreaming Environment into Early Recovery

HIV/AIDS:

(UNAIDS is a focal point for this cross-cutting issue)

- It's not only a question of mainstreaming ER into HIV/AIDS, it's about mainstreaming HIV/AIDS into ER
- Through evidence and research into especially in post-conflict and ER situations, we've seen increasing population mobility, people from different HIV-prevalent backgrounds are interacting, leading to new vulnerabilities and risk of rising numbers of HIV infections
- Progress on integration of HIV into PCNA (and PDNA)
- Into new IASC HIV guidelines, address ER throughout all the different clusters
Peru, affected population had ability to get compensation, came with ER approach, if you don't think in the long-term; we initiated a programme funded through a flash appeal; first time that we were able to deal with land issues, how to deal with their property rights, in order to access the emergency funds

Challenges to Mainstreaming Early Recovery

- To convince a group of people that have an emergency mentality that the longer-term issue needs to be addressed now; in the country team, you have to advocate for that and make sure these people know this is important and is implemented in the flash appeal, in order to get the funds to implement
- In Haiti, a small NGO said “I can put 3’000 transitional shelters, but where – which made us realise that a piece of land was not identified before. We put the strategy in place 2 weeks after the event and we’re still dealing with the consequences – to identify a piece of land that is available and risk-free”
- Donors: we couldn’t get money the way we needed; best got was piecemeal bits; hard to get ER funded
- Working with the old model of the ER cluster was difficult e.g. Pakistan, it was hard to fit into the ER architecture that was set up there
- A lot of what the Agriculture Cluster was doing was ER; we didn’t think that we had to think of it separately; now we realise that we have to think of it and we are getting the training in place, and addressing this issue systematically
- The ER Network is often seen as an add-on – another set of meetings to go to for the cluster coordinators; hard for people to understand; the ER Network needs to demonstrate an added-value
- Clusters trying to work out where they fit in; not clear about the clusters’ role in important processes like PDNA/ER-PCNA
- Label of ER
- Education will always come into ER, which doesn’t always do us a favour with donors
- Need for advocacy; as Education, we’re still struggling to get included (e.g. we were left out of the flash appeal for Kyrgyzstan). Joint advocacy is needed.
- Inter-cluster collaboration is a challenge. When developing strategies to move forward, we need to be sure that the Humanitarian and ER stages are included (esp. For water, health; they’re inter-linked); the stronger this link, the better the response
- We appreciate the ER cluster for looking and thinking at the longer-term and including the principles of ownership; perception that the CWGER cluster has been dominated by UNDP’s own competences
- Usually, the cluster leads have a coordinating (not implementing) function. So CWGER tells us that we have to include ER, then when we go to the other clusters, they tell us to go away, as it’s outside; as cluster members, we regularly confront this problem
- Our biggest challenge is to get cluster participants (our stakeholders) involved and introducing ER to them. People already perceive that they are doing ER, and are asking us why we are coming to talk to them about ER. We already encourage entities to procure from local markets, open access to bring in supplies, etc.
- Capacity on the ground (e.g. to address HIV, with special emphasis on ER)
- If you look in the Guidance Note, there’s 5-6 pgs of activities that can be considered ER; they’re all activities that have been conducted in humanitarian operations. Since calling them ER, some issues have become a question.

We should not underestimate the power of semantics.. Some activities are suddenly questioned as we're now calling them ER. We have to de-mystify this thing.

- It's hard to get examples, because a lot of the activities and approaches contribute to an early recovery response. E.g. Gender: we are strengthening good programming guidance in a holistic way, rather than saying this is strengthening gender programming or ER recovery. It's more to do with the approach and doing it in the proper way. We have to be careful about labelling as this doesn't always help people at the country level. Not easy to separate the ER component.

Opportunities presented by Mainstreaming Early Recovery

- Doing something now that had long-term impact (e.g. Progress to date: what have you done in mainstreaming ER in the work of your cluster, from the viewpoint of a Cluster Read
- Opportunity to learn from the experience , mistakes and challenges of the past as well as the positive to substantively, systematically in the training, in the programming, in the tools
- When there's something tangible (e.g. needs assessment)
- Clarify the clusters' role, align with the ER network, and stress the added value associated with that
- Clusters are continuing to develop guidance on ER
- To clarify CWGER: by separating the role of the cluster from UNDP's business/interests
- Increase capacity of other cluster coordinators; do more field training; have a mix of capacities to be able to gel at personal level as well as hammer out the issues
- We need to de-mystify ER needs so not perceived by donors as an "add-on"; creates perception that's not for now, that's for after; it's about the way we do humanitarian action. We need cases that show we're enhancing recovery (not keeping people in dependence). We need cases that don't even use the words ER. Everyone thinks "green" is expensive, but I have lots of examples that show taking account of environmental considerations offers benefits
- Create a platform in ER to have the different clusters talking to each other, will help us to really mainstream the issue; people don't live in just one sector and we need to reflect this. The coordination of ER has to be more proactive at country level
- Now, there is another voice (CWGER) to help us push this forward with our other stakeholders
- HIV humanitarian actions need to be aligned to national AIDS longer-term strategies and plans. ER can be a critical bridge
 - This will also help us to mobilize resources
- To move away from ER as a label; ER project profile.
 - much of the work you're doing should include ER as an approach within that.
 - e.g. with a recent \$US70 million appeal, we had 17 projects that are ER. We went through to say it's 60% ER. Moving away from ER as a label to say it's an approach within your chapter. From this we were able to say that we've got 3 projects that are ER

- we need to reposition discussion with donors to one that ER is a lifestyle choice, not a label. It's a mindset.

Debate on Mainstreaming Opportunities

The text written in the boxes was derived from the post-it notes; the text in bullet points is the discussion of each point

Provide the ER Network with its own steering group (to parking lot) Inter-agency, Inter-cluster mechanism (is the same as above)

- A lot of people already find the ER Network cumbersome
- There are clusters at the global level that (UNICEF) that have this structure already
- When we discussed with several global cluster leads, they expressed their frustration not to have the space to discuss Early Recovery, not what CWGER does, but what they do; there's a vacuum in a sense

Be ready to do business differently

- This is about getting a real common understanding of what ER is; if everyone understands that ER is an approach to providing support/assistance in a smarter way; very often, we still have this mandate mindset or short-term approach in terms of handouts – we are moving away from that but we're not there yet.
- Let's be careful to not create a new cluster
- As we move forward in our network that functions as a network without creating another cluster

Devise a joint mainstreaming strategy

- We're already trying to do this; I assume it's the same thing as a Work Plan/Action Plan; I prefer to talk about a workplan rather than strategy, so that we something in action

The need for mainstreaming has been identified

- It's obvious now that everyone realises that we need to mainstream and we should build on that

Country CC involved/attending ER training

- Action: involve CCs in ER training (this is a global as well as national issue)

Change/revise the L-model Change the name

- It's not an L; it's a backwards L
- There's still confusion and different opinions about whether this is the right model so we should dive into deeper discussions
- One alternative is to change the name of the cluster; if it is changed, to what?
- It's confusing in practise, although it might work in Geneva
 - who deals with it?
- It could be a strong recommendation if it came out of this room, it would have to be presented at a Global Cluster meeting

Create a Global ERA pool, inter-cluster, inter-agency**Create ER cadre****Revise deployment procedures****To revise modalities of the ERA deployment: more preparation, more transparency, inclusiveness**

- This would be a pool of people, functioning like a centre of excellence (25 hardcore ERAs who are parachuted in, set up the structures, and go out)
- You're not the 1st person to say this; let's have a discussion
- Fully agree we're gone around the other clusters and asked about their rosters and deployments; we end up relying on a small group of 10 people who are trained, deployed, on message
- Often you rely more on internal capacity in lead agency, key partners (e.g. NGOs) and their obligations to make themselves available; the further you go out, if you rely on rosters, it takes time to find
 - it's better to work with a core team
- It can be a combination of surge capacities, rosters, stand-by helpers; there are modalities to support this from different angles – where will it be anchored? Who will manage it?
- The roster has been one of the challenges; we need a core group of people who are at the top of their game who can be relied on for their advice and leadership; you need people who are constantly going out under different contractual arrangements (not just SSAs to make that work)
 - this might mean you have 10-15 people on staff so they are available
- Looking at the profiles of people and what they are expected to do, especially in relation to the other clusters
 - this goes to the question of what
 - it's not the ERA who can advise on mainstreaming ER into those issues
 - bring expertise that the Nutrition experts don't have (e.g. micro-credit) , links that can be developed with other partners
 - this would still be within the domain of ER advice
- The importance of having a core group that you've trained yourself means that you know the competences they have
 - if you rely on rosters, they may send people who are not competent for the job
 - often, we pick people from surge rosters and you take what CIDA or SSRA send you; if it's not good, then it reflects very badly on your own cluster
- In early 2006, we had a similar discussion about rosters, creating a Steering Committee, trying to give a modality to the creation of the roster; in the meantime, in the past 4 years, now we have a roster and we find ourselves in this situation in the country where they are not representing the capacities of what we have. The idea was always there but we didn't manage to do it
 - not sure if the HC will be able to receive so much advice from so many people

- We're talking about mainstreaming and yet we're talking about creating another mechanism

Actually more of the same, doing a good job

- Don't try and reinvent (all these things mentioned above are right)
- Concentrate on what's happening now

Design training for other cluster coordinators on ER in the field coordination & content

- ER has been going on, piloted in 6 countries
- We have to reach out to cluster coordinators and do a substantive training not only on the L-shape, the principles, and the – most of your work is protection, how can ER principles apply to shelter?
 - go and actually build the capacities so that when the ERAs go out
- This is about investment and being strategic; it's really at a global level

Money

- There's a perception that ER taking money away from other programmes?
- Money is one of the biggest sources of conflict in any relationship
- It would be very helpful to have something in the Guidance Note about the knowledge ERAs need to have about resource mobilization and how to work with people on this tough issue
 - keep in mind that there are sources of new money; which can advance the ER agenda that is not taking money away from other activities
- Action: Include this type of training/guidance on resource development

Debate on Mainstreaming Obstacles

People outside the core ER groups still don't understand or get what ER means for them or the response

- This refers to cluster, advisors, and the like
- It's recognize that we all need to go one more step forward in integrating ER into our activities
- There's also a lack of understanding the other way of what we are already doing on ER; we need to find the language/space/labels to be able to communicate what we are actually doing already; so that we can help the ERAs understand what we in the other clusters are doing that contributes to ER
 - the CWGER can work with the other clusters to identify this
 - have exchanges/secondments from cluster to cluster or agency to agency so that the ER person from one cluster can learn from other cluster (this would be a 3-year process according to Puji)
 - there's already been some efforts (re: Monica) asking clusters how they identify ER
 - we need to bring this across the clusters
 - this is about clarifying the definition of ER
 - request cluster leads to send to this working group what are the generic activities that they usually do (ones that are life-saving, ones that are longer-term); this would

be very useful for the ERAs

- action: map ER activities by the clusters themselves

- Whenever we talk about whether ER belongs in one place and humanitarian; it doesn't have to be either/or. As soon as we try to "box" things, we get screwed up. It's better that we characterise, using criteria, to identify as ER – which doesn't mean that it could not also be humanitarian at the same time
- CWGER shares with the other clusters

No global ER network

- The other clusters do not want to discuss ER with CWGER as that means discussing the gap areas, this creates problems because there's so much
- There's a risk that the advisory nature of ER disappears
- In the existing mechanism, there should be a space where we can discuss these issues
- Using inter-cluster meetings and discussing ER there; they start with relief and then go to recovery
- Parallel with Humanitarian Financing Group
 - there are 2 different kinds of meetings that happen, 1) nitty gritty, 2) complex policy discussions
 - action: keep the CWGER label but have different kinds of meetings
- Sometimes it seems like the CWGER is taking on responsibilities in response to a structural weakness; e.g. livelihoods is critical and should exist in its own right as a cluster, so UNDP has taken this up under ER. One could argue the same for Governance, Food Security
 - maybe part of the answer is to propose this
- We shouldn't have the CWGER and put everything that's missing into this cluster
 - it's BPCR, as the cluster lead, who has to decide what goes in and whether more substantial changes are needed

Avoid turf battles

- This touches on who owns ER and who owns where it goes; this discussion has blocked a lot of things from going forward
- If you want to solve this issue of ownership, create an inter-agency Steering Group, so that you have shared ownership; find a common or joint mechanism

No information-sharing on deployment

Lack/need to expand/clarify ER, by sector

- We don't have anything yet on training and capacity-building
- Network partners need to ensure that ER is incorporated into our core training; this would help to develop a mainstream understanding of what we're talking about
- Action: revise deployment mechanism and procedure

Mainstreaming Obstacles, at National and Country Level

- Wishful thinking
- This is an opportunity and obstacle at the same time; the UN is working together on this 1-UN, it is taken more at a development level; if we manage to get into this direction and bring them in, we have more possibility of mainstreaming this
- It is an obstacle because 1-UN excludes NGOs; this is opposed to the foundation of UN reform, which is about partnerships. As long as we have this difference

Appendix 5 Group responses to three World Cafe questions

Question 1: What should be done to best address the challenges in the lessons learned?

Challenges	Recommendations (from the reviews)	Actions UNDP / BCPR
Funding	13-11 Develop joint funding strategies	
Coordination Mechanisms	13-3 Build an inter-cluster support unit, independent of BCPR team 13-4, 13-7, 13-9 Better, stronger HR base; better people and better system 13-6 Rename the cluster 13-8 Common assessment framework 13-5 Review responsibilities & reporting lines	Rename the cluster
Advocacy	13-10 Community of practice Establish strategic communication	Implement the work plan – community of practice
National ownership		
Leadership	13-1, 13-2 Ownership with UNDP/BCPR	Reinforce ER approach in HC/RC training programs
Capacity	13-4, 13-7, 13-9 Better, stronger HR base; better people and better system 13-10 Community of practice 13-5 Review responsibilities & reporting lines	Identify RC/RR champion of ER Build UNDP Country Office. understanding of the three roles Define roll-out model of BCPR within UNDP Country Office Community of practice Identify factors of success in ER units in WFP & UNICEF
Other	Awareness/elaborate communication strategy	
Funding	<ul style="list-style-type: none"> Is Early Recovery under-funded? <ul style="list-style-type: none"> - yes: when reviewing funding opportunities - no: due to lack of clarity of the ER concept; ER interventions are simply not; ER cluster interventions may, however, be under-funded 	
Mandate	<ul style="list-style-type: none"> Clarity and common understanding of the mandates by all humanitarian actors, UNDP in particular, is required Commitment needs to follow Common understanding of mandates, roles, and responsibilities need to be institutionalized prior to crisis, at both global and local levels <ul style="list-style-type: none"> - HC/RC in particularly (who needs to prioritize ER coordination) 	
Needs assessment	<ul style="list-style-type: none"> Realistic expectations should be clarified prior to/during the assessment process <ul style="list-style-type: none"> - this avoids misunderstanding and leads to creating a constructive environment at the inter-cluster level 	

Question 2: What are the 3 most important tasks for UNDP (in its ER coordination role) to undertake in light of the feedback received?

- The rethinking of the L shape and the consequences this could have on UNDP as well as the technical and structural consequences this could have on early recovery
- To build capacity of UNDP country offices (awareness raising on coordination, training) to avoid misunderstanding of country office itself of people like us what we're supposed to do and how the work is being shared with other agencies
- UNDP to facilitate the RCs to lead transition from a humanitarian/ER coordination context to national recovery
- ER network: need to create stronger networks at country and global levels, to provide more space
- Recommendations are often not translated into real life, identified activities are missing (e.g. awareness-raising, communication is a key issue)
- The idea that we've got out there some RCs who are pretty good and we should be actively looking to them as champions and using them as vehicles of change particularly if they don't come from UNDP
- Let's look at the existing ER champions in general; it could be RCs, donors, within UNIEF, etc.
- If we stay at building the capacity of UNDP, we won't go far; we tried to go one step beyond
 - what do we actually mean? what do we actually do?
- Develop a much stronger partnership with OCHA, enhance; OCHA should be more involved in addressing the challenges that have been identified (Rehka)
 - we need to understand where are the gaps, be very specific about what we are missing out
- Clarification of roles & responsibilities, particularly between:
 - 1) thematic areas of interventions covered under the ER cluster
 - 2) ER coordination under the RC/HC and network facilitation
- Agreement on definition of ER internally in UNDP
- Commitment at all levels
- Institutionalisation at global and local levels
- Ensure ERA/ERCC presence throughout the process and continuity
 - suggestion: ER focal points should be appointees at country level prior to crises; this would assist and gradually cumulate (?) the tasks of the ERCCs and ERAs (deployed at the onset of the crisis)
 - this approach would ensure building of/Maintaining local knowledge base
- The "investment" in human resources working on ER should be maintained/deployed further
- Deployment of ERAs/ERCCs should be based on a stronger "matching mechanism"
 - this would ensure specific requirements are met with suitable skills and profiles
- ERAs could be backed up further by CWGER/BCPR support, obtaining senior management buy-in and the support by the HCs/RCs

Question 3: Which other bodies should be involved/ take leadership in addressing the challenges that have been identified?

- We think that the NGOs could/should/must have a stronger role; in fact, they could lead or co-lead a cluster because the more that another partner takes leadership of ER, this neutralizes the strong UNDP role, which agitates/frustrates other
 - this will also help the ER concept to become more mainstream, as provides other networks to filter into
- We talked about more engagement with , improving the access of civil society to ER as a whole (language, convenience, money, sitting outside the capital); finding ways to enable civil society would provide an ER perspective and supports ER thinking
- We linked national ownership not in the sense of government but in the sense of civil society
- What we discussed was again linked to the rethinking of the L-shape
- The recovery network is a tool for the PCNA/PDNA; after these processes, there needs to be a network carrying on the ball; we had arguments for/against when this network should be activated
 - the network should be carrying the ball at local level throughout the needs assessment phase and after
- We also had a suggestion of a global level recovery network, parallel to or very much involved with the local network; the recovery network needs to be a coordinating body with responsibilities, established in reality not just on paper
- We created new bodies: 1) platform where humanitarian & development actors are meeting at a global level with decision-making (not like UNHCR working group) – comes out of a retreat discussion, meeting to address gaps, to allow these actors to communicate and build a common vision, and to deliver it on ER issues (this doesn't exist at the time being)
 - 2) country UN coordination office: which would be a combination of OCHA, strategic planner, recovery advisor, to harmonize one process from relief to development in one place (this is radical)
- Relationship with national governments is missing; need a local ministry as a counterpart
 - this means that at one stage we have to deal with the political dimension of ER
 - there is a political dimension of humanitarian action; we haven't yet done this for ER
- The ER network needs to be better implemented at the local level and possibly established at the global level
- ER Network – PCNA/PDNA processes
 - the network should be an output of the PDNA
 - no, this network needs to be activated earlier, at the very onset of the crisis
 - but the PDNA/PCNA processes need to be coordinated through the network
- National government (including relevant ministries) needs to be included more systematically

Appendix 6 Rules of the Game and Action Points arising from the group work

Additional Principles and Rules of the Game	Actions required
Leadership and partnership	
Early Recovery requires consistent high level political support and leadership from HC/RC	<p>Training and induction programmes for HC/RC and Heads of Agency include ER</p> <p>Revision of the HC/RC TOR to deliver ER leadership and policy guidance</p> <p>Present ER as 'lifestyle choice' rather than distinct intervention / coordination</p> <p>Use the ER Strategic Framework as a common platform for advocacy rather than intervention planning</p>
Partnership strengthens ownership of Early Recovery	<p>Encourage cluster co-chairmanship, including government</p> <p>Engage with local NGOs, CBOs, development agencies, donors, private sector and government counterparts</p>
Assessments, Strategy and planning; information Management	
Cluster system planning is synchronized with national planning cycles	<p>Check budgetary cycle</p> <p>Check donor funding cycles</p>
A complete and holistic response for affected populations requires shared analysis and joint planning	<p>Adopt the ER Strategic Framework and Action Plan as standard tools in a crisis situation</p> <p>Synchronize joint assessments and planning frameworks</p> <p>Agree on key ER indicators to be incorporated across clusters</p> <p>ER planning to consolidate findings from various NA's</p> <p>Ensure integration of Cross-Cutting Issues</p>
Build back better	<p>Each cluster to define what BBB means in their sector</p> <p>Include the specific needs of women, men, boys and girls</p>
ER Preparedness plans are in place	<p>Disaster preparedness plans embrace ER strategies</p> <p>Develop guidelines to ensure that ER is included within contingency planning</p> <p>Ongoing ER activities should not be forgotten as new crises emerge</p>
Clarify role and contributions of IFI in early recovery	<p>Include the World Bank, Regional Development Banks and EC in the ER approach from the beginning</p>

Additional Principles and Rules of the Game	Actions required
Development programming needs to be able to respond to emerging needs	<p>Adapt regular programmes / break the mould</p> <p>New programmes to include flexibility to respond – <i>links to the DRR and conflict analysis thinking and funding</i></p> <p><i>Some link to the architecture section to ensure the systems work...</i></p>
Decision making is based upon the analysis of accurate, timely, up-to-date information	<p>Develop an information management strategy for each crisis</p> <p>Clusters to agree on common information analysis procedures</p> <p>Develop capacity to analyse information and feed into the decision making process</p> <p>Use this analysis to feed into reporting and communication at national and international levels</p>
The Early Recovery Approach requires a meaningful transition to national ownership and the re-empowerment of development processes	<p>Develop guidance on ER exit strategy across all clusters and the transition to recovery and development</p> <p>Establish national development readjustment mechanism</p>
Do No Harm – refer to guiding principles	<p>Apply a conflict-sensitive approach in ER planning to analyse the context, identify the actors, develop the activities, and monitor the impacts to “do no harm”</p> <p>Promote the Inter-agency Framework for Conflict Analysis in Transition Situations</p> <p>Develop policy guidance on mitigating negative impact of relief activities</p>
Coordination and programmes are designed on the basis of existing good practice drawn from inside and outside the UN	<p>Actively capture and disseminate good practices through a range of information products</p> <p><i>Links to Community of Practice and communications</i></p>
Early recovery builds on the capacities, knowledge and experience of local communities.	<p>Assessment, programme design and evaluation should include local partners and local partners where possible</p> <p>Establish a formal mechanism for local actors roles and responsibilities</p> <p>Create a field handbook / guide</p>

Capacity Building	
Existing principle on National Ownership	Create inter-cluster open spaces for training and capacity building at the global level
	<p>Reinforce importance of Transparent and realistic capacity analysis in existing ER assessment tools</p> <p>Ensure Joint programming to address capacity gaps</p> <p>Train/educate stakeholders in ER approach at national and local levels</p> <p>Lead agencies / lead partners to include ER mainstreaming in their core capacity building systems</p> <p>Advocate for ER incorporation into national policies and mechanisms</p>
	<p>Strengthen planning and coordination capacity of local authorities, CBOs and international actors at local level</p> <p>Replicate ER network and coordination mechanisms at local level as appropriate, and provide adequate support</p> <p>Build capacity of international and local actors</p>
ER Architecture, Coordination and mainstreaming	
The name of the cluster at the country level reflects the “gap” areas identified and not covered by other clusters	
Early Recovery is everybody’s business: ownership and accountability is shared throughout international system and donor community	<p>Name the cluster at the country level according to the gap areas it covers</p> <p>Create a global inter-cluster mechanism to support HC/RC, HCT and Early Recovery Networks</p> <p>Develop modalities for inter-cluster ER Coordination platform as a function rather than actual meetings</p> <p>Draw support staff from across UN system, INGOs member states, donors (seconded staff) and government.</p> <p>Give greater recognition to other cluster member agencies and to other clusters</p>
Early Recovery is mainstreamed across all clusters	<p>Develop mechanisms to incorporate ER within the Inter-Cluster Joint Action Plan</p> <p>Clarify roles and responsibilities of ER network</p> <p>Clarify and make specific UNDP’s roles and responsibilities vis-à-vis others</p> <p>Identify roles and responsibilities of entities (clusters, government, donors, communities)</p>

People and systems – HR	
Global support to leadership and immediate virtual or in-country presence	<p>Include section in field handbook to clarify roles, responsibilities and reporting lines of ERAs and CCs</p> <p>Improve skills of ERA/CC with training in political analysis, coordination/facilitation and negotiation</p> <p>Broaden ER roster management to CWGER member agencies</p> <p>Ensure that adequate capacity exists to meet the country level demands and expectations.</p> <p>Create an ER Community of Practice</p> <p>Include section in field handbook to revise management of roster and improve deployment of staff for coordination and advisory roles.</p>
Advocacy and Communications	
	<p>Clarify ER concepts and simplify the definition</p> <p>Use UNDP to advocate with Government for the creation of a early recovery space for the HCT (<i>See 7.2.2</i>)</p> <p>Identify and empower ER champions</p> <p>Educate development actors on Early Recovery</p> <p>Develop an ER communication strategy for each emergency</p> <p>Develop a global ER communication strategy</p> <p>Create inter-cluster open spaces for knowledge exchange and good practice</p>
Funding	
Early Recovery requires timely access to funding	<p>Finalize the criteria for the integration of ER into CAPs</p> <p>Educate staff to ensure that ER gets into CAP and Flash Appeals</p> <p>Advocate that development funding comes forward in the humanitarian phase</p> <p>Encourage government to invest in ER as its prime responsibility and create capacity to respond to their people's needs. (<i>in wrong section?</i>)</p> <p>Develop joint inter agency / cross-cluster funding strategies (based on ER Strategic Framework and Action Plan)</p> <p>Shift funding focus to more coherent, sustainable impact, people-centred approach</p>

Appendix 7

Suggested outline of an ER Field Handbook

Advice on how to approach the writing of the Handbook

- The Handbook should provide a clear roadmap and methodology for dealing with ER and the current constraints and misunderstandings of which we are all aware. o this end, the lessons learned to date should be translated into pragmatic activities and tools, which can help establish the ERA and the ERCC.
- The challenge for the Handbook is to outline HOW TO DO IT.
- A careful review of all relevant IASC manuals is necessary, bringing in the inputs of the ER experts.
- Case examples should be used to better capture complexities and possible options.
- Challenges include:
 - Qualify and quantify, early on, ER within the different clusters and lead agencies and provide a total picture and cost of early recovery programming (developed within the ER cluster) in the CAP and FA
 - Establish the division of the activities among the clusters
 - Clarification of the roles and responsibilities of the ERA, ERCC and ERPS, ERIS
 - Improve/increase knowledge of the ER architecture and process among the decision makers at country level
 - Programmatically link result of humanitarian aid with longer term recovery, development capacity building, and programmes to ensure national ownership, e.g. OCHA operated GIS and generated products handed over to appropriate national entity
 - Raise awareness of donors of ER issues; the existing mechanisms are not amenable to funding ER

Suggested Table of Contents

Guidelines for Use of this Handbook

Feedback form

Acronyms and abbreviations

About us (ER network and cluster)

Preface: specificity of ER coordination mechanisms

Part A: The Cluster

1 Organisation, role, and function of the “ER” Cluster at country level

- 1.1 Getting started and the “ER” cluster coordinator role (reporting lines; templates of generic TOR in annex; cluster roll out)
- 1.2 “ER” cluster structure and functions
- 1.3 UNDP the role of the cluster Lead Agency
- 1.4 Key cluster actors and building partnerships with them
- 1.5 Relationship, coordination and planning with other clusters, groups and national stakeholders

2 Managing cluster coordination

- 2.1 Coordination essentials and common challenges (rules for principled meetings, etc.)
- 2.2 Managing and facilitating cluster meetings
- 2.3 Managing contacts and communication
- 2.4 How to raise awareness on ER (refer to annex on ER architecture and organigram)
- 2.5 Reporting
- 2.6 Negotiation, consensus building, and conflict resolution

3 Communications and managing cluster information

- 3.1 “ER” cluster Information Management systems and tools
- 3.2 “ER” cluster and UNOCHA IM responsibilities (information exchanges; ensure reception of information generated, use of 4W generated in section 4)
- 3.3 ER cluster communication strategy

4 Assessing needs and on-going monitoring

- 4.1 Situation analysis of ER status (who, what, where, when)
- 4.2 Quick Assessment of the ER needs in the emergency situation (NATF)
- 4.3 PDNA/PCNA
- 4.4 On-going monitoring and assessment (contribution to others assessments – from conception and design)

5 Development of cluster plans

- 5.1 Response-planning process (ER cluster strategic plan)
- 5.2 Steps in response planning (identifying ER programming and gaps informed by needs assessments and monitoring – section 4; Develop the cluster to focus only on the gap issue; delivery gaps)
- 5.3 Contingency planning, Preparedness and Crisis Prevention and Recovery
- 5.4 ER cluster exit strategy (linking with longer term recovery and development strategies and plans)

6 Mobilising resources

- 6.1 Collaborative funding appeals (Flash appeal refer to revised IASC guidelines; peace building fund?; CERF, joint inter-agency funding; agency funding; GFDRR/WB; bilateral; etc.)
- 6.2 Mobilising and building human resource capacity
- 6.3 Mobilising and managing materials and equipment (Responsibility of lead agency)

7 Guiding principles and standards

- 7.1 Agreeing on relevant underlying guiding principles and standards
- 7.2 Promoting accountability to affected populations (feedback mechanisms included)
- 7.3 Reviewing “ER” cluster performance and capturing lessons learned
- 7.4 Using advocacy to promote the interests of the “ER” cluster

PART B: The Network

1 Organisation, role, and function of the ER Network at country level

- 1.1 Getting started; ER network advisor role (reporting lines; templates of generic TOR in annex; cluster/network roll out)
- 1.2 ER network structure and functions
- 1.3 UNDP the role of the network Lead Agency
- 1.4 Key network actors and building partnerships with them
- 1.5 Relationship, coordination and planning with other clusters, groups (i.e.: development coordination groups), donors and national stakeholders

2 Managing cluster/network coordination

- 2.1 Coordination essentials and common challenges
- 2.2 Managing and facilitating network meetings
- 2.3 Managing contacts and communication
- 2.4 How to raise awareness on ER
- 2.5 Reporting
- 2.6 Negotiation, consensus building and conflict resolution

3 Communications and managing network information

- 3.1 ER network Information Management systems and tools
- 3.2 ER network and UNOCHA IM responsibilities (information exchanges; ensure reception of information generated; use of 4W generated in section 4)
- 3.3 ER network communication strategy

4 Assessing needs and on-going monitoring

- 4.5 Situation analysis of ER status (who, what, where, when)
- 4.6 Quick Assessment of the ER needs in the emergency situation (NATF)
- 4.7 PDNA/PCNA
- 4.8 On-going monitoring and assessment (contribution to others assessments – from conception and design)

5 Development of network plans

- 5.1 Response-planning process (ER strategic framework)
- 5.2 Steps in response planning (identifying ER programming and gaps informed by needs assessments and monitoring – section 4; Develop the cluster to focus only on the gap issue; delivery gaps)
- 5.5 Contingency planning, Preparedness and Crisis Prevention and Recovery
- 5.6 ER network Exit Strategy

6 Mobilising financial and other resources

- 6.1 Collaborative funding appeals (Flash appeal refer to revised IASC guidelines; peace building fund?; CERF, joint inter-agency funding; agency funding; GFDRR/WB; bilateral; etc.)
- 6.2 Mobilising and building human resource capacity
- 6.3 Mobilising and managing materials and equipment (Responsibility of lead agency)

7 Guiding principles and standards

- 7.1 Agreeing on relevant underlying guiding principles and standards
- 7.2 Promoting accountability to affected populations (feedback mechanisms included)
- 7.3 Reviewing ER network performance and capturing lessons learned
- 7.4 Using advocacy to promote the interests of the ER network

Glossary of terms**Annexes**

- Working on concrete guidance for our first 30 days in different contexts facing different challenges:
- ER roll out in a country with no UNDP capacity (linking to Surge procedures)
- Templates, Table of response and options
- ER architecture/organigram

Appendix 8
Suggested revisions to ER Guidance Note

1.3: Roles and Responsibilities

This needs to be described.

- List of actors, individuals and organizations (for example HC, RC, Cluster lead agency, NGOs, government, IFIs, ERA, ERCC, CD, Clusters, CBOs)
- Inter-linkages and relationships - organigram (lines showing the relations, authority, reporting-lines)
- Mandate and Roles
- ER commitments defined by each cluster

Pre 2.1: ER Preparedness

- Contingency planning
- Awareness raising (country office)
- Advocacy (Humanitarian actors, government etc)
- Mapping of national and regional resources available
- Early Recovery local focal points identified/assigned/trained
- Identification and agreement on the base-line

2.7 People and Systems

- Rosters Management (SURGE capacity)
- Training and refresher courses
- Deployment mechanism and backup support
- Capacity exchange between agencies, organizations and countries
- ER community of practice

2.8 Exit Strategy

- Include section (transition to recovery, reconstruction and development). Needs to be written in the field Hand Book