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Global Nutrition Cluster Webinar on the 2023 HRP process

August 2022

OVERVIEW OF THE SESSION

- Welcome and Introduction (Rasha Al Ardi, Deputy Global Nutrition Cluster Coordinator Operational Support Team)
- Overview of 2023 HPC and HRP Process (Briony Stevens, Coordination Helpdesk and dNCC Partnerships Programmes and Advocacy Team)
- Development of 2023 Humanitarian Response Plans by NC coordination teams (GNC-CT)
- Key considerations: GBV, Gender, Disability, AAP, & ISC (GNC-CT)
- Available support from the GNC (GNC-CT)

OVERVIEW OF 2023 HPC AND HRP PROCESS

UPDATES TO THE 2023 HPC



HUMANITARIAN RESPONSE PLAN AFGHANISTAN

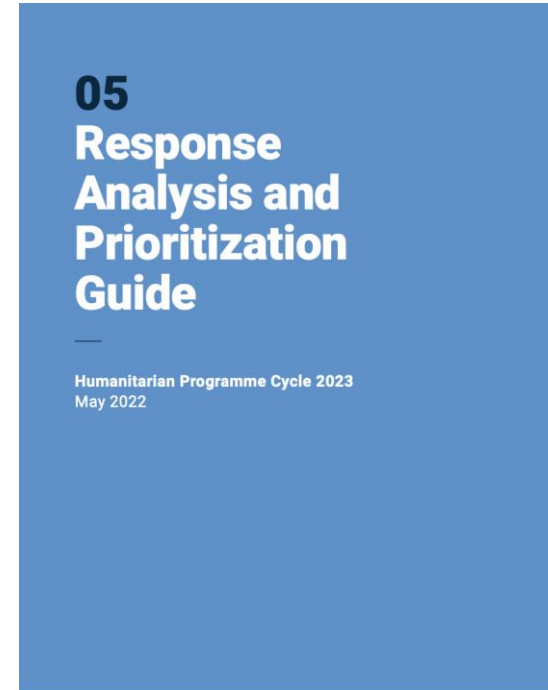
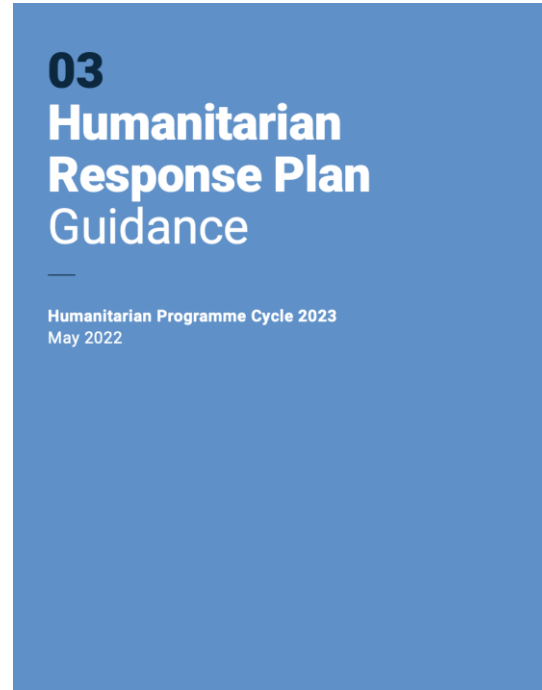
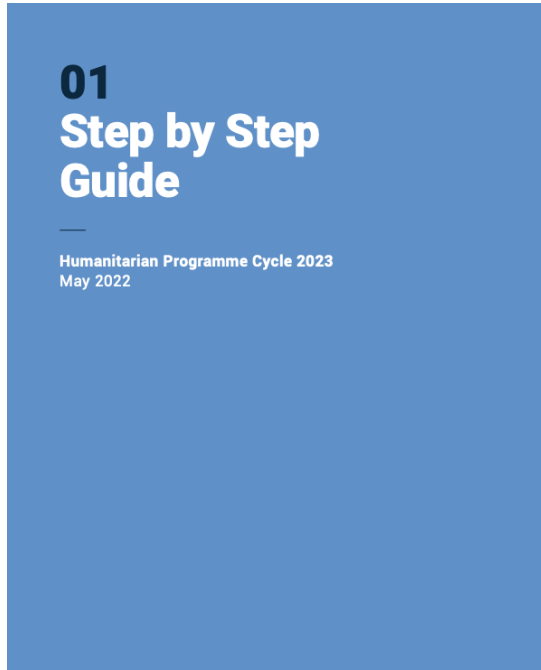
HUMANITARIAN
PROGRAMME CYCLE
2023
Issued December 2022



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LINKING THE NEEDS ANALYSIS TO THE RESPONSE ANALYSIS



<https://kmp.hpc.tools/content/hpc-2023-facilitation-package>



HPC 2023 Facilitation Package

2023 HPC package

In an effort to support interagency roll-out of HPC 2023 a collection of resources and examples have been made available on our knowledge management platform which are available to all partners.

Title (with Link)	Format
1. A Step-by-Step guide to develop the HNO and HRP	Guidance EN FR SP
2.1. 2023 HNO Guidance	Guidance EN FR SP
2.2. (a) 2023 HNO template	Template EN FR SP AR
(b) 2023 HNO InDesign template	InDesign template EN FR SP AR
(c) 2023 HNO Word template (not-official)	Word template EN
3.1. 2023 HRP Guidance	Guidance EN FR SP
3.2. (a) 2023 HRP template	Template EN FR SP AR
(b) 2023 HRP InDesign template	InDesign template EN FR SP AR
(c) 2023 HRP Word template (not-official)	Word template EN
4. 2023 JIAF Guidance (1.1)	Guidance EN
5. Complementary guidance on Response Analysis, Objectives and Targeting for the HRP	Guidance EN FR SP
6. Multi-Year Humanitarian Planning (MYP) Tip Sheet for OCHA Country/Regional Offices (2018)	Tip sheet EN
7. Analyzing risks and determining the most likely evolution of the humanitarian situation	Guidance EN
8. In the absence of one monitoring guidance, this page offers a series of partial guidance and template	Guidance and Template EN-FR
9. HNO Quality Criteria Worksheet	checklist/worksheet EN
10. HRP Quality Criteria Worksheet	checklist/worksheet EN

AVAILABLE GUIDANCE

[HTTPS://KMP.HPC.TOOLS/CONTENT/HPC-2023-FACILITATION PACKAGE](https://kmp.hpc.tools/content/hpc-2023-facilitation-package)

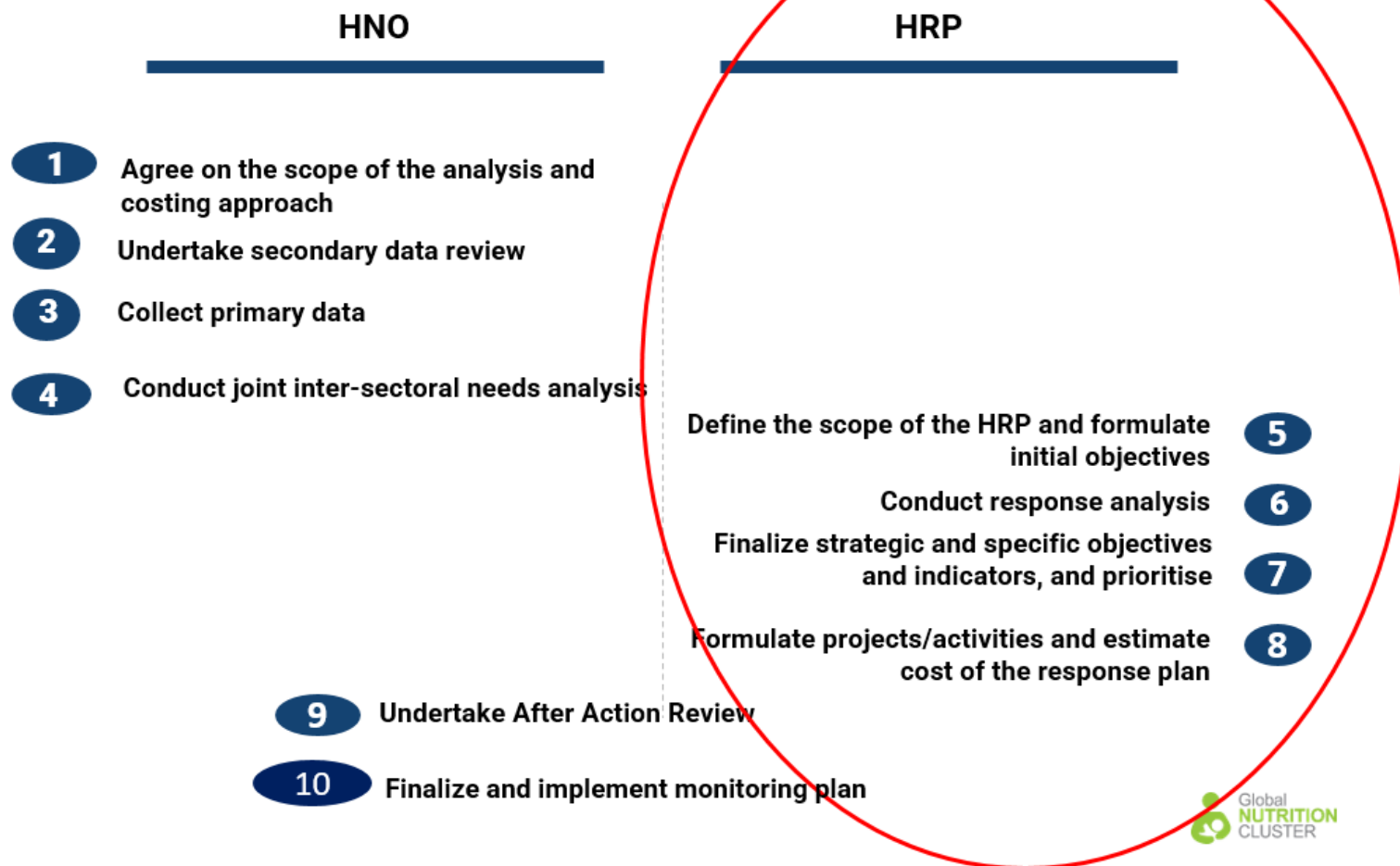
Other key documents

Title (with Link)	Format
1. Nutrition Needs Analysis guidance	Guidance EN-FR
2. The Gender Handbook for Humanitarian Action (IASC) 2018	Guidance EN
3. Guidance on strengthening disability inclusion in Humanitarian Response Plans (2019)	Guidance EN
4. Different Needs, Equal Opportunities: Women, Girls, Boys and Men in the HPC (2016)	Guidance EN-FR
5. 2020 Guidance Note on Reflecting Protection from Sexual Exploitation and Abuse (PSEA) in Humanitarian Response Plans (HRPs)	Guidance EN
6. Flash Appeal Guidance and Template 2020	Guidance and Template EN-FR
7. Scaling up Disaster Risk Reduction in Humanitarian Action 2.0 and DRR checklist 2.0	Recommendations / checklist EN

Global Nutrition Cluster Webinar
on 2022 HNO process
Date: 10.08.21



HPC 2022 Process



2023 HPC TIMELINE

The HPC timeline differs across countries.

POLL: What step of the HPC are you at?

Step 1. Agreed on the scope of the analysis and costing approach

Step 2. Secondary data review completed

Step 3. Primary data collected

Step 4. Joint inter-sectoral needs analysis completed

Step 5. Defined scope of the HRP and formulated draft strategic objectives

Step 6. Response analysis conducted

Step 7. Strategic and specific objectives and indicators finalised and prioritised

Step 8. Projects formulated and HRP costed

DEVELOPMENT OF 2023 HUMANITARIAN RESPONSE PLANS – INTERSECTORAL CHAPTERS AND SECTORAL-SPECIFIC PLANS

ROLE OF THE NUTRITION CLUSTER IN THE DEVELOPMENT OF THE HRP

HPC Step	Cluster-level action	Inter-Cluster action
5. Define scope of the HRP and formulate initial objectives	Consult Cluster members on Cluster priorities and possible interventions that could contribute to strategic objective; develop prioritisation matrix/heat map.	NCC to contribute to intersectoral discussions on priorities by sharing nutrition priorities and potential interventions, identifying complementarities and synergies across sectors.
6. Conduct response analysis	Consult Cluster members on proposed interventions based on appropriateness, relevance and feasibility	NCC to participate in inter-sectoral review of proposed interventions (including locations) and critically analyse based on appropriateness, relevance and feasibility
7. Finalize strategic and specific objectives and indicators, and prioritize	Clusters/sectors to develop response plans and identify cluster objectives and quantify number of people targeted	NCC to participate in Intersectoral level discussion to finalise intersectoral and specific objectives
8. Formulate projects/activities and estimate cost of response plan	Cluster to support partners to develop project sheets and subsequent costing	NCC to support partners to develop intersectoral project sheets +costing. The revision of these projects and overall costing is ideally done with the other clusters.

NUTRITION CLUSTER/SECTOR RESPONSE PLANS - OUTLINE



Nutrition

PEOPLE IN NEED	PEOPLE TARGETED	WOMEN	CHILDREN	WITH DISABILITIES
000M	000M	000	000	000
REQUIREMENTS (US\$)	PARTNERS	PROJECTS		
\$000M	000	00		

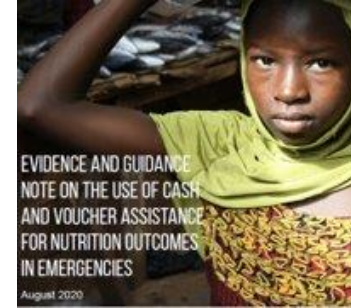
Objectives

Insert text on nutrition needs analysis, linking with specific objectives and strategic objectives. Include text on geographic location, cross cutting issues (such as gender and disability, and their impacts on sector services and context) and intended achievement.

Response

Insert text on subgroups targeted for nutrition response with geographical locations. Include data on number targeted (disaggregated by sex, age and disability). Insert data on main response strategies and modalities. Consider the humanitarian development nexus, and programming adaptations in light of COVID-19. Highlight intersectoral activities and explicitly link with respective Clusters. Expand beyond data disaggregation for sex, age and disability and discuss these cross-cutting issues.

Early recovery must be addressed in Nutrition Cluster/Sector Plans.



malnutrition in children under 5, treatment of acute malnutrition in children and pregnant women, community engagement and mobilization activities etc.

Cost of response

Discuss cost parameters and cluster estimates.

Monitoring

Discuss routine and ad hoc monitoring. Consider SPHERE standards, routine monitoring through prevention and treatment programmes and various assessments and partner surveys including SMART, KAP and SQUEAC/SLEAC etc.

NUTRITION CLUSTER/SECTOR RESPONSE PLANS - OUTLINE

PART 3: CLUSTER/SECTOR OBJECTIVES AND RESPONSE

Objectives, Indicators and Targets



NUTRITION HUMANITARIAN NEEDS ANALYSIS GUIDANCE

Steps to conducting a Nutrition Humanitarian Needs Analysis

The purpose of this working guidance is to outline the steps (summarized in Figure 1 below) for conducting a Nutrition Situation Analysis, identifying information for the Humanitarian Needs Overview (HNO), which feeds into response plans and updates, whether IASC Cluster system has been activated or not. This includes the development and implementation of an annual nutrition assessment plan and a nutrition situation analysis (or align it with IPC's Acute Malnutrition (AMN) results) along with major contributing factors, and calculation of the number of People in Need (PIN) and other key figures for the HNO.



Cluster Objective CO1

Turpis cursus in hac habitasse platea dictumst quisque sagittis

NEED
000k **TARGET**
000k

Contributes to Specific Objective SP1.1 & SP1.2

BASELINE **NEED** **TARGET**

INDICATORS		BASELINE	NEED	TARGET
Parturient montes nascetur ridiculus mus mauris vitae ultricies leo integer		000k	000k	000k
Aliquet sagittis id consectetur purus ut faucibus pulvinar		000k	000k	000k
Enti beatur as mos ilit quis excesciat inusamenim del inust		000k	000k	000k



NUTRITION CLUSTER/SECTOR RESPONSE PLANS - COSTING

	Unit-based costing	Project-based costing
How are costs estimated?	The cluster agrees on standardised, estimated costs for the activities that are identified in the nutrition response plan. This is done by estimating unit costs per person per type of activity.	Cluster members develop projects and project budgets which outline the estimated costs for their organisation to deliver the project.
Who is responsible for costings?	The responsibility for costing lies mainly with the cluster coordination team. However, the standard costs to be applied have to be agreed by all.	Cluster partners are responsible for costing their projects. Each project must be vetted by the cluster before being included in the combined budget.
How is the total nutrition cluster budget developed?	The total nutrition cluster budget is the combined total of the different activity costs.	The total nutrition cluster budget is the combined total of the cluster partner project budgets.



3.2.1 Mapping existing nutrition resources and budgeting for a collective nutrition response

RESUME COURSE DETAILS ▾

Business Decisions of June 2022

Global Nutrition Cluster

estimation (unit) (NIC) (1), as well as the Cluster/Function Cluster Coordination Team to support an impactful humanitarian response. This tool is indicative and should be used following workshops to support coordination, and ultimately, the impact of nutrition work in carrying out cluster coordination functions across cluster countries and can be reconfigured. Therefore, depending on the country context, the cluster coordination and coordination look to enhance their work and that of the interface. The ORC-CO requires a systematic assessment of the performance of both coordination and information management (IM) processes. Throughout this document, the primary focus is nutrition cluster coordination structures and activities, however a majority of activities and outputs are also valid for sector coordination mechanisms or hybrid cluster-sector arrangements.

The checklist will be regularly updated when new information and data become available. The latest version is always available on the SRM website.

Core cluster function	Respected core function activities	Building questions	Key role	Success and potential outcomes
1. Maintain cluster portfolio and structure		Q 1.4: Is the nutrition cluster activated as a stand-alone cluster?	Nutrition cluster activated as a stand-alone cluster	In the early stages of a rapid-onset emergency, or deteriorated protracted crisis, the country VC and NCT can request cluster activation to the IMC. Principals and the ORC, in collaboration with country partners and, where applicable, with country national authorities. The request to launch an in-depth initial analysis, including the scale of humanitarian needs and existing coordination capacity. The ORC, in consultation with the CUs and the global clusters, then provides feedback on the request within 48 hours. There may also be instances when previously merged clusters/units (for instance health and nutrition) become stand-alone entities, and vice versa. Unless justified, it is generally recommended by the ORC that country teams advocate for a stand-alone

1 The nutrition cluster coordination team may include: nutrition cluster coordination, nutrition cluster co-lead, nutrition cluster information management officer, nutrition cluster deputy, and national nutrition cluster coordination and information management officers.

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priority block



DEVELOPING A NUTRITION CLUSTER WORKPLAN

Somalia Nutrition Cluster Workplan, 2019



Somalia Nutrition Cluster Workplan 2019.xlsx
115.3 KB



Yemen Nutrition Cluster Workplan, 2019



Yemen Nutrition Cluster Workplan 2019.xlsx
28.2 KB



CCC1 LEADERSHIP AND COORDINATION

Commitment: Effective leadership and coordination are established and functional

Benchmarks

1. Nutrition cluster/sector coordination and leadership functions are adequately staffed and skilled at national and sub-national levels.
2. Core leadership and coordination accountabilities are delivered

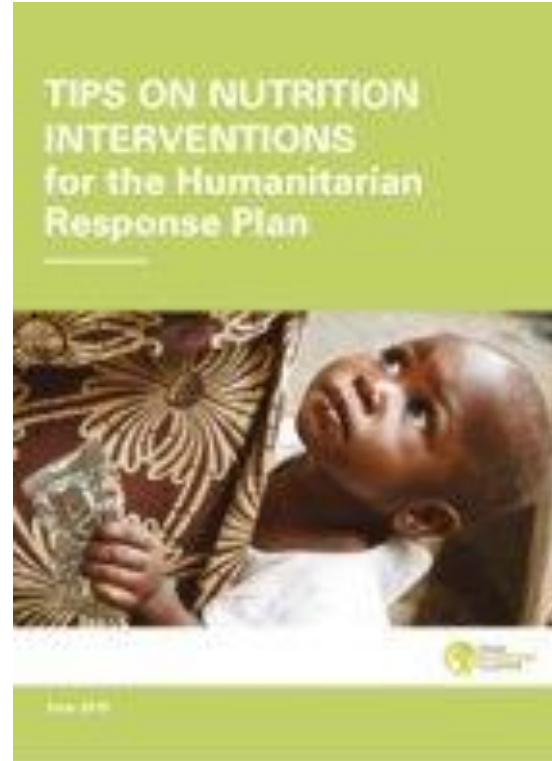
AVAILABLE GUIDANCE

HRP Nutrition checklist v.4 (September 2022)

Notes:

- This checklist was developed to support nutrition cluster/sector coordinators, SAG members, partners, and the GNC team with the HRP process.
- This checklist is streamlined with current (HPC 2022) guidance and addresses nutrition against each of the quality assessment criterion identified in the 2019 GPEI Quality Assessment Criteria.
- This tool can be used while drafting or reviewing the HRP to ensure that nutrition is adequately addressed in all sections of the HRP (sectoral and inter-sectoral). Specifically:
 - The category column refers to the requirements of the 2022 HRPs.
 - The Indicator column provides suggestions (italic text) on how nutrition can be potentially addressed against each quality criteria (regular text).
 - The Comments column can be used to indicate whether nutrition has been adequately addressed against the respective indicator.
 - The Source of Information column highlights the sections and sub-sections of the HRP where the indicator may be applicable.
- It is important to note that this checklist will be updated once the 2022 HRP Quality Assessment Criteria is released (estimated date: October 2021).
- This checklist supplements current (2022 HPC) HRP guidance including the Response Analysis, Formulation of strategic and Specific Objectives and Targeting, the HPC Step by Step Guide on Humanitarian response planning steps, GNC HRP Tips and the HRP annotated template. These guidance documents can be found at: www.humanitarianresponse.info/en/programme-cycle/space
- If you have questions about this tool or if you would like to provide feedback, please contact Antehneh Dobamo at adobamo@unicef.org.

CATEGORY	INDICATOR/ASSESSMENT QUESTION	SOURCE OF INFORMATION (Refer to HRP template)	COMMENTS
Solid understanding of context and operational environment	1. The HRP and Cluster/Sector Plans identifies factors that drive needs and humanitarian consequences. <ul style="list-style-type: none"> Where applicable, the key underlying factors that contribute to malnutrition are identified in the HRP and align with the analysis results from the HING. 	0.1; 0.2; 1.0; 1.1; 3.1	
	2. The HRP Cluster/Sector Plans identifies which groups are particularly strongly affected by the crisis (for example women or men; adolescent girls; children; Older people; people with disabilities; or displaced people). <ul style="list-style-type: none"> Sub-groups vulnerable to malnutrition should be considered, for example children 0-59 	0.1; 0.5; 1.1; 3.1; 4 (where applicable)	



Menu **AGORA**

Short E-Course
UNICEF activity

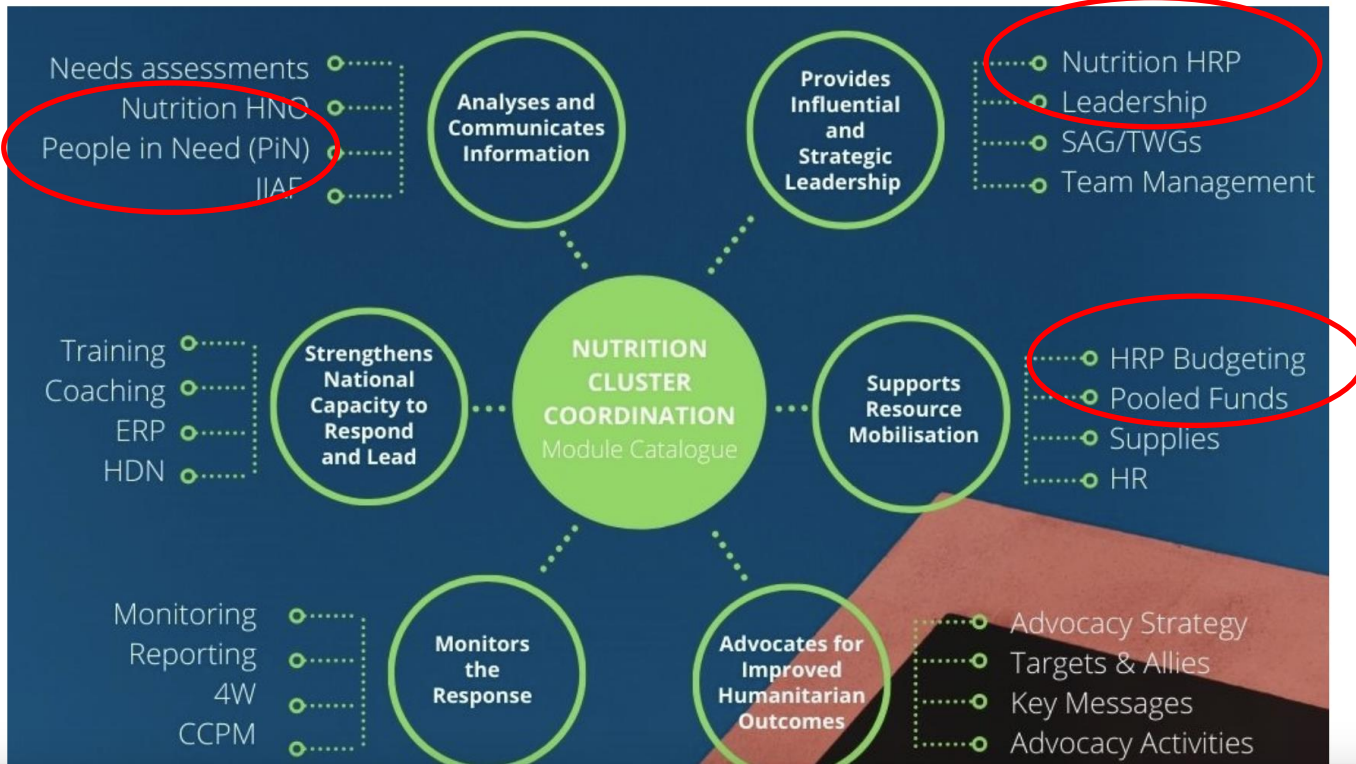
Nutrition Coordination in Emergencies Preparedness and Response

This course provides an overview of coordination guidelines for nutrition and health professional stakeholders.

- Topic: Focus areas, Nutrition
- Format: Online courses, Short e-course
- Provider: UNICEF
- Language: English
- Compatibility: Agora Offline, Tablet, Smartphone
- Location: HQ



Nutrition Cluster Coordination Modules



Return to:

- Your GNC dashboard
- Cluster Coordination Learning Channel

Provider(s)

UNICEF promotes the rights and wellbeing of every child in 190 countries and territories, with a special focus on reaching those in greatest need.



NUTRITION CLUSTER COORDINATION ELEARNING MODULES

Step 5: Define the Scope of the HRP and formulate initial Objectives`

- [The development of a Humanitarian Response Plan \(HRP\)](#)
- [Developing a nutrition cluster response plan](#)

Step 6: `Conduct Response Analysis`

- [Using the Nutrition Humanitarian Needs Analysis Calculation Tool](#)
(additional and linked to the HNO webinar includes :
 - [Conducting a nutrition cluster HNO analysis](#)
 - [Calculating the number of people in nutritional need \(PiN\)](#)
 - [JIAF Indicators and Severity](#)
 - [JIAF Aggregation and PIN](#)

Step 7: Finalise strategic and specific objectives and indicators`

- [Developing a nutrition cluster monitoring and evaluation framework](#)
- [Introduction to Nutrition Data and Indicators](#)

Step 8 Drafting of the HRP, project development and costing.

- [Mapping existing nutrition resources and budgeting for a collective nutrition response](#)

KEY CONSIDERATIONS AND PRACTICAL TIPS FOR CROSS-CUTTING THEMES

GBV Risk Mitigation & Disability Inclusion across the HPC

CLUSTER OBJECTIVES

1 objective that references safety and inclusion or accessibility to nutrition services

PIN and TARGETS

PIN and targets disaggregated by sex, age and disability

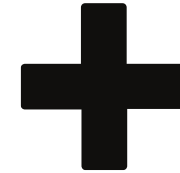
MONITORING

Disaggregate indicators by sex, age and disability to monitor impact of the crisis and equal access to assistance



PRIORITY ACTIONS in nutrition interventions

Integrate targeted actions for groups with intersecting forms of vulnerabilities (e.g. address specific nutrition requirements of adolescent girls with disabilities, pregnant adolescents)



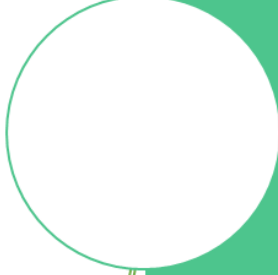
Undertake essential or minimum actions on GBV risk mitigation and disability inclusion (e.g. conduct regular safety and accessibility audit of nutrition services and facilities; work with local women's rights orgs and orgs of persons with disabilities to collect contextual information around safety and exclusion concerns)

TOP TIPS FOR DISABILITY INCLUSION



Participation:

Reach out to local organizations of persons with disabilities (OPDs) to engage in assessment and response planning
Ensure that feedback and complaints and community engagement mechanisms are accessible, including for persons with hearing, visual and intellectual disabilities



Response planning (example activities):

Measures to improve accessibility of facilities and communications
Adaptation of screening tools and processes to accommodate different impairment types
Outreach to groups excluded from nutrition interventions (e.g. children with disabilities who are out of school)
Identification of specific nutrition requirements of persons with disabilities and health conditions
Delivery of training to nutrition partners on disability inclusion and establishment of working groups on inclusion
Capacity building of OPDs to engage in nutrition interventions



Monitoring:

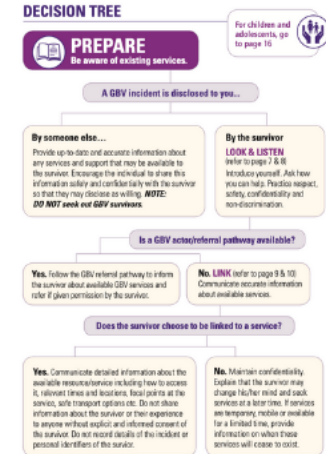
Disaggregate relevant indicators by sex, age and disability to monitor equality of access
Conduct safety and accessibility audit of nutrition services and facilities to identify any barriers to access

Practical Tips for GBV Risk Mitigation

Barriers in accessing services/risks to GBV (Humanitarian Needs Overview)	Possible GBV Risk Mitigation Measures	GBV Risk Mitigation Indicators
Women cannot access nutrition treatment services due to cultural norms (they cannot travel without a male chaperone)	Create mobile nutrition teams or establish mobile nutrition centers	
Increased protection risks in/on the way to nutrition sites (including GBV) hampering access	Conduct safety and accessibility audits of sites to better understand areas where there are safety concerns (e.g. on the way to/around nutrition sites) and ensure safe access to nutrition sites	# or % of sites where safety audits were conducted
Negative coping strategies to obtain food or money to buy food especially for child- and female-headed households	Include child- and female-headed households (with SAM children) in the selection criteria for cash assistance	# or % of households/individuals (disaggregated by sex, age, disability) that have received CVA



Essential/Minimum GBV RM action



Train frontline workers on psychological first aid and how to receive GBV disclosures in a supportive and non-stigmatizing manner.

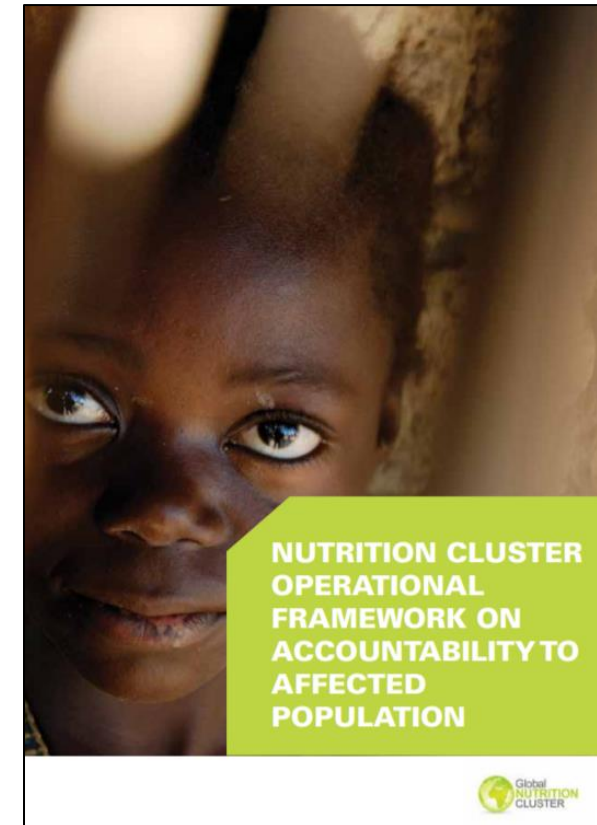
Indicator: % of Nutrition staff and frontline workers who received an orientation/training on how to safely receive disclosures of GBV and provide the latest information on available GBV services

PRACTICAL TIPS FOR AAP

Tool 13.4 Tip sheet to monitor AAP performance in Clusters

Cluster Coordination Performance Monitoring (CCPM) is an opportunity to integrate Accountability to Affected Populations in Cluster coordination. This tool provides a list of guiding questions to monitor how AAP is integrated in the 6 core functions of Clusters, identify gaps and propose actions to strengthen AAP.

Core functions and guiding questions	Current status	Proposed action
Support service delivery		
<ul style="list-style-type: none"> Do cluster meetings include a standing agenda item to discuss feedback from affected populations? Do cluster meetings give enough space and time for all members, particularly local and national actors, to express their views and concerns? Has a 4W analysis on AAP been conducted in clusters meetings? The analysis should cover how members have engaged and consulted with affected populations, what affected populations are saying, what clusters could do to address the feedback, and when and how clusters will report back to communities on follow-up actions. Are AAP and community engagement good practices and approaches from Cluster members regularly documented and shared? 		
Inform the HC/HCT's strategic decision-making		
<ul style="list-style-type: none"> Is a common approach to community engagement being promoted amongst all cluster partners? (this is usually supported by an AAP/community Engagement working group working across all clusters) Has the working group together with the clusters defined the most appropriate methodologies to engaging with affected people in assessments? Do assessments include open-ended questions on people's perceptions and their priorities for the response? (who is most vulnerable; the most appropriate responses; their preferred information channels; the way they want to participate and influence the response) Is data collection carried out in collaboration with other clusters to ensure coherence of data, limit duplications and avoid overburdening communities? Do all cluster members disaggregate data to include sex, age, disability and other diversities as part of assessments and monitoring? Are gender, age, disability and other crosscutting issues, as well as measures to better address them, regularly discussed in clusters meetings? 		
Strategy development		
<ul style="list-style-type: none"> Have local key informants been engaged in the development and validation of response plans, ensuring that interventions are relevant and appropriate? Does the strategy include indicators and benchmarks on the quality, satisfaction and effectiveness of responses? Have affected communities been involved in establishing the criteria that determine success of coordination and responses? Are the CHS (and the revised Sphere standards) used by cluster members, and with affected communities? 		



PRACTICAL TIPS FOR CVA

Prevention of malnutrition



- Combine household assistance with individual feeding assistance
- Combine household cash or vouchers with SBC interventions
- Provide conditional cash transfers to incentivize attendance to priority preventative health services

Treatment of malnutrition

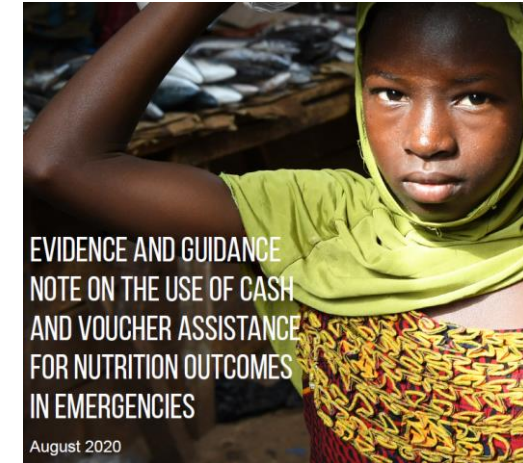
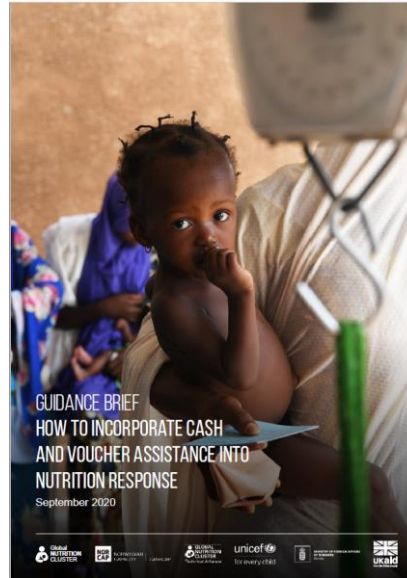


- Provide cash or vouchers to facilitate access to treatment of malnutrition
- Provide household cash or vouchers assistance to caregivers of children with SAM

PRACTICAL TIPS FOR CVA

HRPs:

- Clarify whether CVA will be used to deliver planned programmes
- Include information on evidence used to determine use of CVA
- State the percentage of the response delivered by using CVA and number of people targeted with CVA
- Include outcome-based, non-CVA specific indicators for the monitoring of sector-level objectives.



PRACTICAL TIPS FOR INTER SECTORAL COLLABORATION (ISC)

"It is the **convergence** of effort, at the **same time** and in the **same geographic locations** built on **severity ranking** and **prioritized needs**, to **achieve an agreed upon outcome** based on **agreed standards.**"

- PIN and targets population have been identified during the HNO process
- Together agree on target affected populations / areas
- Jointly agree on technical interventions and a minimum package of inter sectoral interventions
- Decide on delivery modalities of specific technical ISC
- Decide on where and how to resource share
- Jointly decide on specific indicators to collect for ISC
- Jointly discuss an inter sectoral monitoring plan
- Jointly agree on inter-sectoral reporting system
- **Brief your partners on ISC and encourage consortia to holistically respond to the population needs**

Elearning modules

Key Considerations and Practical Tips for Cross-Cutting Themes

[Effective leadership within a nutrition response](#)

[Nurturing a cluster coordination team](#)

[Introduction to Emergency Response Preparedness \(ERP\)](#)

[Implementing a cluster coordination performance monitoring \(CCPM\) exercise](#)

[JIAF Coordination Set-up, Good Practices and the HPC](#)

Cross-cutting themes (specific)

[GBV risk mitigation in cluster coordination,](#)

[Cash and Voucher Assistance \(CVA\) in humanitarian coordination](#)

[Disability inclusion in humanitarian coordination,](#)

[Introduction to Inter-Cluster Coordination | Review 360 \(articulate.com\)](#)

AVAILABLE SUPPORT (VIRTUAL)

- Bilateral support calls (continuous throughout process)
- Review of draft HNO and HRP document

HNO		Inter-sectoral (HNO and HRP)	
Anteneh Dobamo Adobamo@unicef.org		Rachel Lozano Rlozano@unicef.org	
HRP			
English-speaking countries	French-speaking countries	Spanish-speaking countries	
Briony Stevens bstevens@unicef.org	Geraldine Bellocq Gbellocq@unicef.org	Geraldine Bellocq Gbellocq@unicef.org	

Reference tools and guidance

https://www.nutritioncluster.net/Coordination_Toolkit

QUESTIONS?



THANK YOU

nutritioncluster.net