

T ***ECHNICAL GUIDELINES*** **FOR THE CONSOLIDATED** **APPEALS** **2008**

KEY POINTS:

- ◆ CAPs should be thorough but concise. They don't have to be encyclopedias. They can summarise and refer to more detailed information elsewhere.
- ◆ Be clear on needs. Be clear on who is taking responsibility to respond to which needs.
- ◆ In principle, **all major humanitarian projects of all major NGOs in a crisis should be counted in the CAP**. Listing projects in the CAP doesn't guarantee funding for them, but it's painless, easy, and has no downside. It makes the CAP a comprehensive inventory of key planned actions, and a meaningful barometer of humanitarian funding for the crisis – a major advocacy point.
- ◆ Copy the 'template' section in this document to use as your Word document for writing the appeal, to preserve formatting.
- ◆ Use the checklist on the next page.

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CONSOLIDATED APPEAL DOCUMENT CHECKLIST

Before submitting your document to OCHA Geneva, please use this checklist to ensure that all the necessary information has been included. This will avoid unnecessary delays in finalising the appeal document.

Coherence of the CHAP and projects

- Is the description of needs evidence-based, with sources footnoted?
- Is there a clear link between strategic priorities and sector response plans?
- Do the projects directly respond to needs and priorities identified in the CHAP?
- Have the projects been selected through a vetting process?

Document, attachments and annexes

Did you:

- Include a table or chart showing humanitarian coordination structures?
- Include a monitoring matrix?
- Include photos with captions and credits (agency or person taking the photo, place, year)?
- Include other graphics (maps, charts, tables) to visualize data? (preferably, send them separately, clearly indicating where in the document you want us to add them – photos in .jpg please!)
- Did you have a native speaker of the appeal language proof-read, **spell-check** and grammar-check the document?
- Is every acronym spelled out at its first appearance in the text? Are acronyms used only for phrases that appear more than twice?
- Are you attaching a list of e-mail HQ contacts for all NGOs presenting projects in the appeal?

Project sheets

- Does each project sheet have all necessary information?
- Is each project sheet maximum one page (with standard margins and fonts)?
- Do multi-agency projects show the breakdown of funding requirements per agency?
- Are all the project sheets gathered in one Word document?
- Do the budget numbers add up correctly?

PART 1: APPEAL DOCUMENT TEMPLATE (with explanations per section)

Note: A page is defined as one A4 size paper (Width 21cm – Height: 29.7cm) with margins set at Right: 2cm, Left: 2cm, Top: 2cm, Bottom: 2cm and font size set at Ariel 10 pt.

**** For each section, Best Practice is available on line:
<http://ochaonline.un.org/humanitarianappeal/webpage.asp?MenuID=7887&Page=1239>. **Take a look at what others have done before you.**

A real document template follows. You can save a copy and use it as the basis for your appeal document (deleting all the sections above, and the annexes below). If you leave the formatting unchanged as much as possible, it will be much easier for OCHA-Geneva to publish your appeal on time.

You can delete any instructional text in blue or red when you start writing your appeal in this template.

COUNTRY NAME 2008

ORGANISATIONS PARTICIPATING IN CONSOLIDATED APPEALS DURING 2007:

AAH/ACF/ACH	CORDAID	HDIG	LWF Nepal	OSIL	UNDP
ABS	CPA-LIRA	HDO	MAG	OXFAM	UNDSS
ACORD	CPAR	HFe.V	Mani Tese	PACT	UNEP
ACR	CPCD	HI	MAT	PCI	UNESCO
ACTED	CRC	HIA	MCI	PIN	UNFPA
ADRA	CREAF	HKI	MDM	PSF	UN-HABITAT
AET	CRS	Horn Relief	MEDAIR	Relief International	UNHCR
Africare	CWS	HWA	MEMISA Belgium	RFEP	UNICEF
ALISEI	Danchurchaid	ICMC	MERLIN	RPDP	UNIDO
AMREF	DDG	IFRC	MH e.V.	RUFUO	UNIFEM
ARC	DENAL	ILO	MONEC	SBF	UNJLC
Atlas Logistique	DEPROSC/Nepal	IMC	NAWF	SC Alliance	UNMAS
AVSI	DRC	INTEROS	NCA	SCU	UNODC
CA	EM/DH	IOM	NCDM	SDA	UNOSAT
CAM	EMERGENCY	IR	NDO	SERLO	UNRWA
CARE INT	EMSF	IRC	NE	SFP	UNV
CARITAS	ERM	IRD	NI	SIMAS	VESTA
CCF	FAO	IRIN	NPA	Solidarités	VETAID
CCM	FAR	ISDR	NRC	SOLO	VSF
CEASOP	FCE	Julikei	NSET	SSLS	WACRO
CENAP	FSD	JVSF	OA	TASO	WANEP/APDH
CESVI	GAA (DWH)	KOC	OC	TEARFUND	WE
CIRID	GPI	KPHF	OCHA	TEWPA	WFP
COLFADHEMA	HA	LIBA	OCPH	UNA	WHO
COOPI	HABEN	LSTG	OHCHR	UNAIDS	World Concern
					WVI

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A GENERIC MAP IS ADDED BY THE CAP SECTION. Please insert other maps in the document if you want. If they're too big, attach send them as a separate attachment, indicating clearly where it should be inserted.

1. EXECUTIVE SUMMARY (1 PAGE MAXIMUM)

Key Issues to Include:

- Message 1: What is the origin and evolution of the crisis? What are the main humanitarian consequences in terms of needs and risks, and on different groups (e.g. women, boys and girls)?
- Message 2: What are the priority humanitarian actions for the next twelve months?
- Message 3: What is the total amount of money in \$¹ requested?

Remember, some readers may only read the Executive Summary so make sure it is concise and transmits **no more than three** clearly articulated messages.

Please include the below box of basic facts for your country, and cite the source. Show the trend over time if possible – this is key to convincing donors of the severity of the crisis. Please check the background in annex 2 for more information on indicators.

Some basic facts about (name of country)

	Most recent data	Previously
Population	... people (UNFPA 2007)	
Under 5 mortality	... p/1,000 (UNICEF 2005)	
Life expectancy	... years (UNDP HDR 2006)	
Prevalence of undernourishment in total population	... % (FAO Statistical Division 2004 estimate)	
Gross national income per capita	USD ... (World Bank Key Development Data & Statistics 2005)	
Percentage of population living on less than \$1 per day	... % (UNDP HDR 2006)	
➤ Proportion of population without sustainable access to an improved drinking water source	... % (UNDP HDR 2006)	
➤ IDPs (number and percent of population)	...	
➤ Refugees		
➤ In-country	...	
➤ Abroad	...	
➤ ECHO Vulnerability and Crisis Index score (V/C)	.../... (To be filled in by CAP Section if country team has no access to the data)	
➤ 2006 UNDP Human Development Index score	... (score, position, Human Development low/medium/high)	
Also ➤	<i>State here other interesting or relevant country-specific statistics (i.e. population growth, maternal/infant mortality, population living with HIV/AIDS, etc)</i>	

(CAP Section will add summary tables of funding requirements per agency and sector.)

¹ Editing note: at the document's first use of the dollar sign (\$), we add in footnote, "All dollar figures in this document denote United States dollars." After that, you do not have to type "US\$" every time.

2. 2007 IN REVIEW (3 PAGES INCLUDING GRAPHICS)

INSTRUCTIONS: Complete this section only if there was a previous Consolidated Appeal. Write an overview of what was achieved in the previous year. Focus on the BIG PICTURE. You should include completed strategic monitoring matrices from the previous year as an annex. Also information at a regional level, or from longer ago, might be important to help understand the present situation.

Key Questions to Answer

1. What were the overarching goals/priorities in the previous year's CHAP?
2. What has been the cumulative result of pursuing last year's CHAP goals/priorities?
3. Why has the IASC country team achieved or not achieved its goals/priorities?

Remember to focus on the IASC country team's overall priorities and goals, not just those of one block of actors (e.g. the UN) or a single organisation. Use credible evidence with specific facts and numbers to back up your statements. Sources of evidence could be monitoring reports, assessment reports, surveys, academic research, Financial Tracking Service / FTS (<http://www.reliefweb.int/fts>), etc.

When using FTS, do not assume that lack of funding to CAP projects meant beneficiaries were not assisted. The activities in an unfunded CAP project may have been implemented by another organisation outside the appeal, such as an NGO. Sector leads should be monitoring this, and the CAP should reflect it.

Provide credible evidence of overall results and impact (e.g. changes in mortality/morbidity, protection, advocacy for humanitarian space, etc.), not just relief items supplied. Refer to your 2007 CAP monitoring scheme. Use monitoring reports, assessment reports, academic research, etc as sources. If there have been no results, or negative results, explain why. If there is insufficient information, state what's being done about that.

(NOTE: Sector-specific reporting in the CAP should have greater emphasis on the beneficiary impact of their actions, rather than the bureaucratic achievements such as frequency of meetings held.)

4. Based on what was achieved or not achieved during the previous appeal period, what lessons have been taken into account in the CHAP for the coming year?

5. *Humanitarian financing:* Has the response to the CAP been adequate, timely and flexible? What was funded outside the CAP, and why was it not counted in the CAP either before or after funding? (See FTS Table E.) Which donors have increased or decreased their funding compared to previous years, and why? What are the practical results of under funding in the various sectors? Are there innovative financing instruments, like pooled funds? How or to what extent has pooled funding improved the quality and efficiency of humanitarian action? How were allocation decisions made for CERF or other pooled funds? Summarise how CERF funds were used in sectors neglected by donors.

6. *Humanitarian coordination:* What actions have been taken to strengthen this function, including the establishment of a broad-based humanitarian country team? What progress has been made in developing strong partnerships between UN and non-UN actors? Where the cluster approach is officially adopted, comment on: inclusiveness of clusters; role of clusters in identifying needs, setting priorities, and monitoring impact; modes of coordination among clusters.

In general, CAPs should better highlight NGO, Red Cross and local preparedness and response capacity. That way the UN demonstrates that it seeks to strengthen system-wide preparedness and response capacity (as well as coordination).

3. THE 2008 COMMON HUMANITARIAN ACTION PLAN

3.1 THE CONTEXT AND HUMANITARIAN NEEDS ANALYSIS (UP TO 4 PAGES INCLUDING GRAPHICS)

INSTRUCTIONS: To complete this section of the document, you will need data that has been reviewed and organised with the **Needs Analysis Framework (NAF)** or an alternative mechanism for sound needs analysis. Needs analysis should be evidence-based, inter-agency and multi-sectoral (drawing on needs assessments which are usually sector-specific). Information in this section should be backed up by evidence and referenced accordingly. (Sources of information may be: surveys, contingency plans, monitoring reports, government data, academic research.) If information is unavailable (for example because of insecurity) or unreliable, explain why, and what is being done to improve information.

3.1.A The context (2 pages including graphics)

INSTRUCTIONS: This sub-section should outline the root cause of the crisis and its evolution, including any regional or historical dimensions.

Key Questions to Answer

- What are the most important factors causing or compounding the humanitarian impact of the crisis (e.g. displacement, abuse of human rights, loss of livelihoods, interruption of social services, climatic, environmental, HIV/AIDS)?
- What factors, if any, are contributing to a lack of protection or abuse of human rights?
- What is the demography of the country, and what are the most vulnerable groups? (Present this information in a table or chart if possible, disaggregated by sex and age. Please disaggregate beyond gender if necessary, i.e. livelihood groups, regions, ethnic minorities, etc.)
- What inequalities could put certain groups at additional risk (e.g. gender, racial, religious, age)?
- What is the national capacity (government and civil society) and willingness to respond to the crisis?

3.1.B Humanitarian needs analysis (2 pages including graphics)

INSTRUCTIONS: This sub-section should explain the major humanitarian consequences of the crisis and how they are inter-linked. This section must be based on credible needs assessments and sound analysis. Use data organised through the Needs Analysis Framework, or alternative evidence-based inter-agency and multi-sectoral mechanisms to support your analysis. This section should specify:

- humanitarian need (overall, not just those needs that will be addressed through the projects listed in this appeal – though the CAP should include as many of those as possible);
- key data such as mortality and morbidity rates, nutritional status, food intake, etc. To the extent possible, show how data differs among specific groups (e.g. women, children, the displaced, refugees, host populations) and/or geographic regions. Present data in a table or chart;
- a map—if possible—showing concentration of needs in the country, geographic priorities, or other relevant data.

Key Questions to Answer

(Remember: at this stage, focus on NEEDS and RISKS not the country team's RESPONSE to those needs. The response to needs will be covered in Section 3.3.)

1. What are the agreed priority needs for protection and humanitarian assistance in this crisis and why?
2. How are the priority needs related to one another?
3. What factors are placing additional risk on people? What risk?
4. Recognising that needs and risks may differ across demographic groups (e.g. women, the elderly, IDPs, children), what are the specific needs and risks of such groups in this particular context?

3.2 SCENARIOS (0.5 PAGES)

INSTRUCTIONS

Develop best, worst and most likely scenarios based on available information and the IASC country team's analysis of how the crisis may evolve. Scenarios should be consistent with those developed through contingency planning. (NOTE: Contingency planning refers to the worst-case scenario. The CAP is based on the most likely scenario.)

Key Issues

Each scenario should include:

- core assumptions;
- potential triggers for future events;
- outline of who would be affected and how;
- outline of note how this would impact humanitarian needs and responses.

3.3 STRATEGIC PRIORITIES FOR HUMANITARIAN RESPONSE (1.5 PAGES INCLUDING GRAPHICS)

INSTRUCTIONS

State clearly and succinctly the overarching and multi-sectoral strategic priorities for humanitarian action that are **relevant** and **achievable** within the appeal period (usually 12 months).

NOTE: WHAT IS A "STRATEGY"? It is not a statement of obvious imperatives, like "meet the needs of the most vulnerable people." It's a summary of how we will achieve these imperatives, given operational and resource constraints.

Key Questions to Answer

- What results do you expect by the end of the appeal period?
- What indicators will be used to measure progress towards objectives (no more than five)?
- What are the key population groups, regions, and sectors of the overall response?

Additional questions:

- How will the different sectors link to address the strategic priorities?
- How will the strategic priorities for response promote gender equality and address the needs of specific groups at particular risk (such as people affected by HIV/AIDS, etc.)?
- How will the strategic priorities address protection concerns?
- How will the strategic priorities advocate for humanitarian principles and human rights if needed?
- How will the participants in this CAP co-operate over the coming year to ensure that priority actions are implemented?
- Are priority needs being addressed by other actors, or through other strategic programming tools such as CCA/UNDAF, World Bank Poverty Reduction Programmes, bilateral aid programmes, etc.?

3.4 RESPONSE PLANS (2 PAGES PER SECTOR)

INSTRUCTIONS

Each sector lead is to write a succinct response strategy for each sector, after consultation among agencies participating in the sector or cluster. Each sector strategy must operationalise one or more of the strategic priorities outlined in the previous section. Each sector strategy should be inclusive of the main organisations working in that sector.

Note: For financial tracking purposes, the IASC has defined 12 standard sectors. (These are listed below in alphabetical order. In the Consolidated Appeal document, sectors should be presented in order of priority, in line with the strategic priorities for response.) However, if the country team has working groups that differ from this standard roster (e.g. if nutrition is a separate working group, instead of being rolled into health), then the response plans in the document should reflect the actual coordination arrangements on the ground. FTS is able to track in these non-standard sectors (as well

as clusters, which resemble non-standard sectors, for CAPs that have adopted the cluster approach), and simultaneously in the standard sectors.

Key Issues. Each Response Plan should include:

- specifying which organisation is the sector/cluster lead.
- overview of the priority needs and response strategy in this sector;
- a list of the organisations participating in this sector strategy, preferably with a map of who is covering what where;
- between one and five SMART **objectives** for the sector;
- between one and five key sector-wide **indicators** for measuring progress towards objectives;
- a brief explanation of how the sector group will monitor the indicators and objectives;
- the implications if this response plan is not implemented.

(See p. 24 for more guidance on what kind of projects go into which sector.)

3.4.A Agriculture

(includes food security)

3.4.B Coordination and Support Services

(includes telecommunications, information centers, common humanitarian services)

3.4.C Economic Recovery and Infrastructure

(includes rehabilitation, income generation)

3.4.D Education

3.4.E Food

3.4.F Health

(includes reproductive health, nutrition, psycho-social support)

3.4.G Mine Action

3.4.H Multi-sector

(as much as possible, use this only for multi-sector refugee or IDP assistance)

3.4.I Protection/Human Rights/Rule of Law

(includes peace-building and peace promotion activities, institution-building for justice, national human rights groups)

3.4.J Safety and Security*

3.4.K Shelter and Non-Food Items

3.4.L Water and Sanitation

* (i.e. Safety and Security of Staff and Operations)

4. STRATEGIC MONITORING PLAN (0.5 PAGE)

Monitoring is a big gap in CAPs, but it shouldn't be a big mystery. It is simply a matter of choosing key indicators with which you'll monitor the evolution of the crisis, the humanitarian needs, and the implementation of the response. (See glossary for more on indicators.)

INSTRUCTIONS: Outline how the IASC country team will monitor progress towards the objectives outlined in the CHAP. Focus should be on monitoring the strategic priorities and objectives (as opposed to projects, which are to be monitored by each implementing organisation). Start by choosing **3-4 basic indicators for which you know you have baseline data** and for which obtaining follow-up data is feasible. Remember that each sector response plan will also propose its own sector-specific indicators for its objectives, so choose higher-level indicators for strategic monitoring. The indicators should be a mix of those that measure the effectiveness of humanitarian response, e.g. "proportion of displaced people who receive full and regular humanitarian assistance," and those that measure the upstream worsening or improvement of the crisis, e.g. "number of newly displaced people." State how the country team will collect the necessary information, how often, who is responsible for analysing the information, and what decision-making structure will act on the information. The aim of the plan is to establish a structure for the IASC CT to determine whether or not strategic priorities and response plans should be changed, and how.

Key Issues to Include:

- How will the IASC CT monitor changes in the broader context?
- What are the strategic monitoring indicators, and what sources of information will be used to measure them?
- How will the country team collect the necessary information, how often, who is responsible for analysing the information, and what decision-making structure will act on the information?
- How will the IASC CT monitor needs throughout the appeal period, including those of specific groups deemed particularly vulnerable?
- How will the IASC CT monitor its planning scenarios and triggers, and discuss the need for major shifts in strategy?*
- How will implementation be monitored in real time to allow the HC and cluster leads to know the situation?

SAMPLE STRATEGIC MONITORING PLAN (Central African Republic 2007):

The HC, with the support of OCHA and sector leads, is responsible for strategic monitoring of the context and of humanitarian action, with particular attention to the progress made on the implementation of strategic priorities. Strategic monitoring will also provide the humanitarian community with a basis for reviews and evaluations, such as the Mid-Year Review in June 2007.

In concert with the HCPT, the Office of the HC will undertake a Mid-Year Review in June 2007. In the event of a significant change in the situation and needs in the country before that time, reviews and revisions to the programme may be conducted earlier. On the basis of evolution in the context and its humanitarian consequences, and progress achieved towards strategic priorities, the HCPT will adjust the CHAP as necessary, while initiating planning for the 2008 CAP, if applicable, by August 2007.

Monitoring of strategic priorities

Strategic priority (abbreviated)	Indicator	Monitoring methodology
1. Promote human security.	<i>Decrease in maternal, child, and infant mortality.</i>	<i>Health Information System (HIS).</i>
	<i>Decrease in malnutrition rates.</i>	<i>Nutritional survey.</i>
2. Provide protection and assistance to IDPs in the	<i>Number of IDPs who receive direct assistance.</i>	<i>Reports from implementing partners.</i>

* The IASC *Guidance note on using the cluster approach to strengthen humanitarian response* elaborates much of this: <http://ocha.unog.ch/humanitarianreform/Portals/1/cluster%20approach%20page/Introduction/IASCGUIDANCENOTECLUSTERAPPROACH.pdf>.

<i>northern provinces.</i>	<i>Passing of legislation, and other observable Government action designed to promote rights of people.</i>	<i>Monitoring of legislation and behaviour of local Government authorities towards IDPs.</i>
3. Reinforce local and national capacities.	<i>Increase of projects with CBOs as implementing partners, and micro-projects implemented by CBOs.</i>	<i>Consolidation of information from partners through reporting and regular meetings.</i>
	<i>Increase in projects where national or local authorities play an important role.</i>	<i>Monitoring of involvement of national social services in development and humanitarian projects.</i>
4. Reinforce and integrate coordination mechanisms.	<i>Quantity of available analytical information products, including reports, data products, and maps, about the humanitarian situation.</i>	<i>Monitoring of information products produced by humanitarian organisations.</i>
	<i>International media coverage of humanitarian issues in the CAR.</i>	<i>Monitoring of international media.</i>
	<i>Number of partners using common coordination services, including logistic support.</i>	<i>Monitoring of requests and instances of use of common coordination services by humanitarian organisations.</i>

5. CRITERIA FOR SELECTION AND PRIORITISATION OF PROJECTS (1 PAGE)

Selection means selection of projects for inclusion in the CAP, after vetting to make sure they are suitable. **Prioritisation** means differentiating the selected projects to ensure that donors cover the most urgent ones, given that they probably don't have enough funds among them to fund all suitable selected projects.

A. SELECTION

INSTRUCTIONS: Use the IASC's "Guidance on CAP Project Selection and Prioritisation" (http://www.reliefweb.int/cap/CAPSWG/CAP_Policy_Document/Guidelines/Guidance%20for%20Project%20Selection%20and%20Prioritisation_final.pdf). Explicitly state the selection criteria for projects to be included in the Consolidated Appeal. All projects in the appeal must be in line with the strategic priorities in the CHAP, and sector objectives in the relevant sector. They should moreover be feasible for the proposing organisation, high priority, and economically budgeted. IASC policy states clearly:

"(A) The emergency components selected for inclusion in the appeal for which funding is actually requested must meet the following criteria:

1. Demonstrated relationship to survival requirements of identified group/s of severely affected people including refugees and IDPs;
2. Demonstrated delivery and implementation capacity by the concerned agency to procure and deliver inputs: i. within the time frame of the appeal; ii. According to specific nature of the input, e.g. seeds depending upon agricultural cycle.

(B) Inclusion of rehabilitation activities and inputs must meet the following criteria:

1. Demonstrated functional/supportive relationship to relief interventions such as: i. repair or construction of infrastructure such as roads, bridges and ports, demining, aircraft hire and similar; ii. Restoration of essential facilities (e.g., provision of potable water, basic health care infrastructure, cattle vaccination, shelter); iii. Costs of administration, monitoring etc. that are directly related to (A)1. above;
2. Demonstrated agency capacity to procure, deliver and distribute required inputs and ensure implementation within the appeal time frame."

(from "Consolidated Appeal Process Guidelines [As endorsed by the Inter-Agency Standing Committee on 13 April 1994]")

All projects should be reviewed by sector groups, and submitted to the UNRC/HC for final inclusion in the appeal. Only projects that fulfill the criteria are to be included in the appeal. Projects that do not meet the agreed criteria may be removed by OCHA Geneva.

Key Issues to Include:

- How were the projects vetted and selected for inclusion in the appeal?

Sample criteria for project selection:

- a) Sectoral criteria: the appealing organisation's project helps to achieve sector response plan objectives which have been developed to address priority needs.
- b) Organisational criteria: the appealing organisation has the technical expertise in-country, capacity, and mandate to implement the project, or can mobilize this operational capacity as required.
- c) Demographic criteria: the project will address a priority vulnerable group, as determined by the IASC CT.
- d) Geographic criteria: the project will be implemented in a region that is considered to be a priority.
- e) Temporal criteria: the projects can make a measurable impact in the time-frame of the appeal (usually one year).
- f) Other context-specific criteria: e.g. projects that include a focus on HIV/AIDS; projects that help to build local capacity, projects that promote gender equality.

B. PRIORITISATION

Donors expect projects in CAPs to be better prioritized, enabling them to ensure that the most important needs and projects are covered, given limited funds. There is no specific prioritization scheme that can apply to all CAPs, but the CAP SWG encourages at least a 2-step or 3-step scheme according to whatever are the most important factors in a specific crisis. Those could, for example, include:

- Relief vs. recovery/transition;
- Geographical or target groups priorities;
- Pre-selecting projects that meet the CERF life-saving criterion.

Each project should be marked with its priority designation in the document. (FTS can track funding according to priority group.)

6. SUMMARY: STRATEGIC FRAMEWORK FOR HUMANITARIAN RESPONSE

(Also called a “Logical Framework”)

This section summarises and charts the relationship between the strategy (3.3), response plans (3.4), and projects (Vol. 2).

INSTRUCTIONS: Summarise your agreed strategic priorities, response plans objectives and projects as in the following table.

Example:

Strategic Priority	Key indicators	Corresponding Response Plan Objectives		Associated Projects
Ensure basic survival of the 300,000 most vulnerable IDPs and host communities in the north.	U5 acute malnutrition; key disease incidence; liters/person/day potable water; ...	Food	Provide monthly food aid packages	WFP EMOP
		Health	Immunise 100,000 IDPs and host family children against measles	UNICEF immunisation project Save the Children project
		Wat/San	Ensure 15 litres of water per person living in IDP camps	Oxfam well project UNICEF water supply project

7. IMPACT OF PILOT SCHEMES TO IMPROVE HUMANITARIAN ACTION:

In any country piloting a new approach (NAF, pooled funding, GHD, humanitarian community partnership team, peace-building commission etc.), the CAP should comment on how/whether these approaches have improved the quality of humanitarian action in the country.

Example – Cluster approach: To what extent have clusters been formed? Analyze how the cluster leads have progressed towards fulfilling their responsibilities. What are the remaining gaps and how/when will they be filled? Are the clusters inclusive of all relevant actors? Are clusters coordinating amongst each other? Have clusters led to better prioritization between projects, and if so, demonstrate how. Why are the non-CAP projects whose funding is shown on FTS Table E not counted in the CAP – are those organizations not participating in the cluster?

NAF: This should include information on how beneficiaries were involved in identifying humanitarian needs and in assessing the quality of the response.

8. CONCLUSION

Optional. Re-state key facts and advocacy points if you want.

ANNEXES

Attach Annexes as required (starting with List of Acronyms and Abbreviations), labelling them ANNEX I, ANNEX II, etc.

Please note that the table DONOR RESPONSE TO THE 2007 APPEAL (from FTS) will be inserted as an annex by OCHA Geneva.

The International Federation of Red Cross and Red Crescent Societies should provide 2-page input on their strategy and appeal for the crisis, to be annexed to the appeal. The local IFRC representative should indicate whether this will be provided in the field or through their headquarters directly to OCHA Geneva.

ANNEX I.

ACRONYMS AND ABBREVIATIONS

INSTRUCTIONS:

Please use acronyms only when a phrase is spelled out more than twice in the document. If so, spell out the acronym in the first instance in the text, and include it in an annexed list of acronyms. Be careful that your text is still meaningful to non-expert readers (i.e. avoid too many technical acronyms). Never put an acronym in an appeal draft without providing the full spelling – the CAP Section cannot track down all acronyms at the peak of appeal season, and therefore may have to delete the sentence. (You can find the CAP's list of all archived acronyms—over 5,000—at <http://ochaonline.un.org/humanitarianappeal/DocView.asp?DocID=1479>.)

In the acronym list in annex, put the acronyms in the left column, and name-in-full in the right hand column. Translate names if necessary. See example below.

AWKAF	Ministry of Religious Affairs
CA	Consolidated Appeal
CAP	Consolidated Appeals Process
CCA	Common Country Assessment
CHAP	Common Humanitarian Action Plan
EMOP	Emergency Operation
ERC	Emergency Relief Coordinator
FA	Flash Appeal
FAO	Food and Agriculture Organization of the United Nations
FTS	Financial Tracking Service

When an acronym's full phrase is in a foreign language, a translation is preferable.

VOLUME 2 : PROJECT SUMMARIES (1 PAGE EACH)

INSTRUCTIONS: Each organisation that is submitting a project to the appeal must complete a one-page project summary sheet. Remember that the one-pager is a *summary*, and that interested donors usually request more information when they become interested in funding it. Please also bear in mind that you will be able to change your project later on if needed, fast and easily. Note also that the January-December timeline is indicative – a project can very well start in February and end in January, for example. Only multi-year projects should be cut in pieces in order to reflect an (approximate) 1-year budget.

OCHA-Geneva will send a Word document that contains this project summary template. It's also online at www.humanitarianappeal.net. Please forward this (or the URL) to all agency field offices to use for filling out CAP project sheets. Using that template will make it much easier for OCHA-Geneva to publish your CAP on time. (Some countries will use an experimental on-line project upload system for CAP 2008.)

TECHNICAL GUIDELINES FOR THE CONSOLIDATED APPEALS 2008

Best Practice: <http://ochaonline.un.org/humanitarianappeal/webpage.asp?MenuID=7887&Page=1239>

Appealing Agency(ies):	<i>Name(s) of appealing organisation(s) in bold and capital letters, followed by acronym in parenthesis () e.g. WORLD HEALTH ORGANIZATION (WHO) ** NOTE: it's essential to follow this org name format, so that we can upload the project automatically into the FTS database. **</i>
Project Title:	<i>Be concise. Capture the essence of the project</i>
Project Code:	<i>[Leave blank – code number is assigned by OCHA's FTS]</i>
Sector:	<i>Choose ONE sector from the IASC standard list: Agriculture, Coordination and Support Services, Economic Recovery and Infrastructure, Education, Food, Health, Mine Action, Multi-Sector, Protection/Human Rights/Rule Of Law, Security, Shelter and Non-Food Items, Water and Sanitation]</i>
Objective:	<i>What does the project aim to achieve? This should relate directly to one of the sector objectives.</i>
Beneficiaries:	TOTAL: Children: Women: Other group (specify): <i>Disaggregate TOTAL as much as possible.</i>
Implementing Partner(s):	<i>List partners, only in the sense of those whom you will subcontract – not those with whom you will coordinate e.g. Ministry of Health, Oxfam</i>
Project Duration:	<i>From when to when does the project run? Note that a project's duration can exceed one year. In that case, total project budget covers the whole project, while funds requested should be the portion needed for 2008 only. e.g. January – December 2008</i>
Total Project Budget:	\$ (Optional, if different from Funds Requested.)
Funds Requested for 2008:	\$ Bottom-line amount appealed for in the CA for 2008 only.

Needs

(What is the evidence for the needs that this project addresses? Be specific—do not just repeat the sectoral response plan's needs analysis; state the evidence for needs for this project's particular target group. (E.g. to propose a wat-san project for Bulungu, give the water and water-related disease statistics for Bulungu.) Also, how does the project support overall strategic priorities and sector objectives?)

Activities

(What are the project's main activities?)

Outcomes

(What are the expected outcomes?)

FINANCIAL SUMMARY	
Budget Items	\$ *
Staff costs (example)	
Inputs costs (example)	
Administration costs (example)	
TOTAL	

*** Values should be rounded off as much as possible to the nearest hundreds/thousands.**

“Do’s and Do not’s” for project sheets

Please DO NOT send project sheets longer than 1 page (nor shrink the standard margins and font). They will be returned to the agency and not included in the appeal until shortened to 1 page. Remember that a project sheet is an “advertisement” for a project, and that interested donors will contact the Agency if they require additional information.

DO NOT send joint or multi-agency projects without specifying the funding breakdown per agency. Otherwise, FTS will have to split the project funding requirement equally among the joint appealing agencies.

DO NOT forward project sheets to Geneva that are missing any of this information. Either they will not be published in the CAP, or the CAP Section will have to bother the OCHA field office to follow up with the agency field office to get the missing info.

Consolidated Appeal Feedback Sheet

If you would like to comment on this document please do so below and fax this sheet to + 41-22-917-0368 (Attn: CAP Section) or scan it and email us: CAP@ReliefWeb.int Comments reaching us before 28 February 2008 will help us improve the CAP in time for 2009. Thank you very much for your time.

Consolidated Appeals Process (CAP) Section, OCHA

Please write the name of the Consolidated Appeal on which you are commenting:

1. What did you think of the review of 2007?
How could it be improved?

2. Is the context and prioritised humanitarian need clearly presented?
How could it be improved?

3. To what extent do response plans address humanitarian needs?
How could it be improved?

4. To what extent are roles and coordination mechanisms clearly presented?
How could it be improved?

5. To what extent are budgets realistic and in line with the proposed actions?
How could it be improved?

6. Is the presentation of the document lay-out and format clear and well written?
How could it be improved?

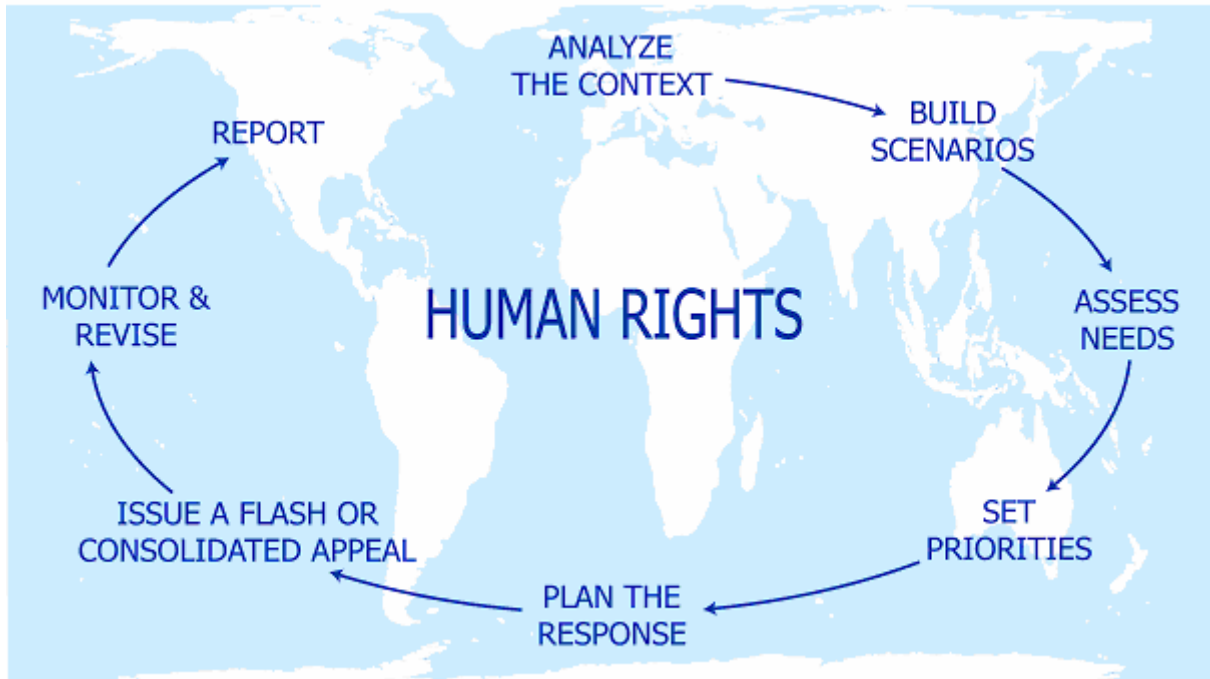
Please make any additional comments on another sheet or by email.

Name:

Title & Organisation:

Email Address:

CAP - Aid agencies working together to:



<http://www.humanitarianappeal.net>

**OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS
(OCHA)**

**UNITED NATIONS
NEW YORK, N.Y. 10017
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**PALAIS DES NATIONS
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SWITZERLAND**

Part 2: ADDITIONAL INFORMATION

KEY SUBSTANTIVE ISSUES

CERF and appeals

The Central Emergency Response Fund (CERF) is a stand-by fund established by the United Nations to enable more timely and reliable humanitarian assistance to victims of natural disasters and armed conflicts.

CERF is intended to complement – not substitute for – Consolidated Appeals and Flash Appeals. The action plan comes first, in order to shape the demand size (Appeal), CERF is part of the supply side and allocates funds to the priority life-saving projects identified by UNCT, under the leadership of the HC/RC.

Through its rapid response window the CERF provides seed funds to jump-start critical operations and fund life-saving programmes not yet covered by other donors.

For countries where an Appeal framework exists, CERF funding is reflected inside the Appeal. If CERF funding is provided to address time critical needs not initially planned in the Appeal, new projects should be added to the Appeal.

Through its under-funded window the CERF provides allocations twice a year to the highest-priority under-funded projects in the Consolidated Appeal.

Clusters and CAPs

A. Clusters and Sectors: the difference

- Clusters strengthen sector working groups (whose role is already clearly defined in the CAP).
- Clusters enhance sectors by mandating a structure of accountability; a provider of last resort; and clear goals.
- Some clusters cover areas (e.g. camp management) that fall between the lines of 'traditional' sectors. Others (like water-sanitation) cover sectors where capacity and the role of the sector lead were insufficient.
- The IASC also approved three "sectors within the cluster approach": Food, Education and Agriculture. (This is an awkward way of saying that these sectors did not exhibit the same weaknesses in leadership and provision of last resort as the others, and therefore did not have to be re-organised and re-designated as 'clusters.' In other words, they function the same as clusters, with the only difference being that the lead agency is seen to be already fulfilling the role of 'provider of last resort'.)
- Some sectors go un-mentioned in the cluster approach: refugees, mine action, security, coordination & support services.

At the country level, sectors and sectoral groups have always existed and they will continue to exist. In the past, however, it was usually the case that only a limited number of sectors had clearly designated lead agencies accountable to the Humanitarian Coordinator. The cluster approach aims to rectify this by ensuring that within the international humanitarian response, there is a clear system of leadership and accountability for all the key sectors or areas of humanitarian activity. The cluster approach is intended, therefore, to raise the performance and strengthen rather than to replace the system of sectoral coordination under the overall leadership of the Humanitarian Coordinator.

Concerning terminology, some Country Teams prefer to speak of "Clusters/Sectors" and "cluster leads", while others prefer to stick to the more traditional terminology of "sectors", "sectoral groups" and "sector leads" (or in some cases, "working groups", "thematic groups" or "task forces"). It should be left to Country Teams to decide on a case-by-case basis on appropriate terminology for the country in question, depending on the working language and agency preferences. To ensure coherence, standard terminology should be used within each country and similar standards should be applied to

all the key sectors or areas of humanitarian activity. There should be no differentiation between “Clusters/Sectors” and “sectors”.

Key Tasks of the Cluster Leads in the CAP

- 1) Organising needs assessments and aggregating / analysing resulting info.
- 2) Detailed Response Plan for the Cluster – specific (SMART) objectives and division of labour.
- 3) Ensure that non-UN actors are part of the CHAP and CAP process, including national partners wherever possible.
- 4) Bringing the project proposals developed by the cluster together, with a peer-review vetting to ensure that the programmes are relevant, high priority, feasible and economical.
- 5) Cluster leads, when pulling together cluster projects for an appeal, must be both inclusive (NGOs and Red Cross/Red Crescent) and exclusive (cut out the fat).
- 6) Cluster leads should monitor funding and advocate as needed. (Apart from very special cases, it is inefficient for the cluster lead to receive and channel funds to other cluster members; they play the role of advocate, and signal the most urgent projects to donors.)
- 7) Cluster leads should lead strategic monitoring for their area of responsibility (measuring and reporting on progress against objectives, in the sense of both implementation and impact).
- 8) Ensure that cross cutting issues (viz. gender, HIV/AIDS etc.) pertinent to the specific emergency are addressed through programmes in the CAP.

C. Clusters and Financial Tracking

- For appeals in crises using the cluster approach, FTS will track in clusters as well as in ‘traditional’ sectors. (Sectors come in a fixed standardized list approved by the IASC, and so can be used to compare to other appeals and to previous years. By contrast, clusters tend to vary from appeal to appeal.) For these appeals, OCHA CAP Section will paste a table of funding per cluster into the document (with a table of funding per standard sector in annex.)
- Country teams not adopting the cluster approach should not call their sector working groups “clusters.”

Coherence of the CHAP and projects

A perennial complaint from donors is that the CHAP is valuable, but the series of projects that makes up the rest of the CAP is sub par – too many are non-humanitarian, not addressing a strategic humanitarian priority, not feasible for the proposing organization, not economical, overlapping with proposals not listed in the CAP, etc. The country team (and ultimately the HC) has the responsibility to make sure that every project in its CAP really deserves to be there, and therefore the CAP really **deserves to be 100% funded**. Otherwise, donors cannot be held accountable for funding according to humanitarian need. Vetting the project proposals starts in the sector working groups. The HC should rely on OCHA to double-check all the projects.

- Is the description of needs evidence-based, with sources footnoted?
- Is there a clear link between needs analysis, strategic priorities, sector response plans, and specific projects?
- Do the projects directly respond to needs and priorities identified in the CHAP?
- Have the projects been selected through a vetting process and according to IASC humanitarian criteria? Has OCHA reviewed each project to confirm this?

Cross-cutting issues

CAPs (and the humanitarian action that they reflect) should deal with a range of crosscutting issues. Do not leave them until the last minute and try to add them to the text as an after-thought. Instead, communicate now with the sector or cluster leads (copying the HC) and make sure they are incorporating them into their sector response plans. The country team may also decide, in the CAP workshop, that one or more crosscutting issues is so critical in your particular crisis that addressing it rises to the level of a strategic goal for the CAP.

Each CAP should:

- ☑ Integrate gender analysis throughout the CHAP.
- ☑ Include projects that respond to different needs of men and women, girls and boys.
- ☑ Disaggregate data by sex and age.
- ☑ Include protection and human rights in your analysis and response.
- ☑ Discuss the impact of HIV/AIDS on the crisis and ensure that the response is appropriate.
- ☑ Explain implications of access and security on your assessment of need and your response.

Needs assessment and analysis – integrating the NAF

Needs assessment is being emphasised by donors at every opportunity. The IASC agrees with this emphasis. Each CAP country team for 2008 is supposed to use the Needs Analysis Framework to organize information, highlight key facts, analyse the raw data and individual assessments, identify key information gaps, and select indicators with baseline data to allow strategic monitoring. The NAF can be published as a free-standing document, or it can be annexed to the CAP document (with a summary in the main part of the CAP).

NGOs and the CAP

The CAP is an IASC tool; NGOs would therefore be right to consider it as belonging to them as much as to the UN. Nonetheless, it undeniably is still seen in many quarters as a UN fundraising tool. NGOs keeping their project proposals out of the CAP is a **major problem**: it distorts the analysis of funding for that crisis (because if projects are not listed in the CAP, we do not know what their unfunded requirements are). However, some progress is measurable: for example, in 2007 all CAPs contained NGO projects. ECHO in DR Congo has mandated that all projects it funds be listed, retroactively if necessary, in the DR Congo Action Plan – thus making that appeal much more meaningful as a funding barometer. The IASC urges other donors and NGOs to follow suit.

Now is the time to break down remaining barriers. In principle, **all major humanitarian projects of all major NGOs in a crisis should be listed in the CAP**. A good way to find which NGOs are significant and not yet included in the CAP is checking at FTS table E for your country – this list gives all reported funding outside of the appeal.

Listing projects in the CAP does not guarantee funding for them, but it is painless, easy, and has no downside: it offers lots of free publicity and visibility (CAP documents are sent to every donor capital). OCHA and the IASC cannot control NGO decision-making, but OCHA should always encourage donors to encourage or even require their NGO partners to list the projects they fund in the CAP (à la ECHO DRC).

Some common misunderstandings re NGOs and CAP, which you should help to dispel:

If an NGO puts a project in the appeal, can it still send the proposal directly to its usual donors?

Definitely. The CAP is not a funding pool or channel. All appealing agencies, UN and NGO, should follow up directly with their donors.

An NGO may know that a certain proposal is already likely to be funded, so why should it bother listing it in the CAP?

Because it helps the humanitarian system and therefore the affected people, by making it likelier that donors can be held accountable for supporting all priority humanitarian actions according to need. If half of humanitarian actions are not counted in the joint appeal, then it is impossible to assess whether needs are covered sector by sector, and whether donors are doing their job.

An NGO has listed projects in past CAPs, but they were never funded. Why should it bother?

Was it listing its main, core humanitarian projects, the ones most likely to be funded? Or did it list less popular projects, because it saw no need to put popular projects into the CAP? That would make pessimism about CAP fundraising for NGOs into a self-fulfilling prophecy. We hope NGOs will list their main projects, so that their funding needs (and donors' response thereto) are counted in the overall funding picture for this crisis.

CAPs are (usually) on a January-December cycle, but an NGO may be working with different project start and end dates. Do they have to change their project timing to put it in the CAP?

Not really. A CAP has a common time frame in order to unify the efforts of many organisations into one accountable humanitarian plan and price tag. If an NGO's actual project time frame varies from that of the CAP by a couple of months, that shouldn't be a reason to keep it out of the CAP. (Anyway, many projects that are planned as January-December in the CAP end up starting many months later, because of funding delays.)

How can NGOs review their input?

NGOs in the field should, as for UN Agencies, receive the first and second field drafts and be allowed to comment on it. When the final field draft is sent to HQ level, e-mail contact details for these NGOs should also be provided, so that the NGOs' HQs can review the document when it is circulated to the CAP SWG.

TECHNICAL TIPS

- Please send your CAP as two Word (.doc) files only, one for the main narrative (CHAP) and one for projects. Include pictures and graphs in the doc if they're not too many bytes; if they are too big, send them separately (or contact OCHA CAP Section for help) but with precise indications on where CAP Section should insert them in the documents. Graphs should always also be pasted into the Word doc as Excel objects (or sent as separate Excel documents) – not as pictures – so that CAP Section can edit them if needed.
- Photos, graphs and charts are good. Use them abundantly.
- Please ensure that someone whose mother tongue is the appeal language does a spell and grammar check on your document before sending it.
- Do not invest a lot of time trying to calculate sums of project funding requirements (e.g. per sector, per agency), especially as they change a lot at the last minute. FTS does this automatically once the projects are uploaded into the FTS database. At most, you may want to calculate approximate totals per agency and sector at the draft stage, so that the HC and IASC CT can assess the financial side.

GLOSSARY

Common Humanitarian Action Plan (CHAP)

The CHAP is the foundation for developing a Consolidated Appeal or a Flash Appeal. It is a strategic plan for humanitarian response in a given country or region. Under the leadership of the UNHC, the CHAP is developed at the field level by the IASC Country Team. At the discretion of the UNHC and the IASC Country Team other non-IASC organisations can also be included in the CHAP². In addition, other key humanitarian stakeholders may be consulted during the elaboration of the CHAP, such as host governments and donors. The CHAP includes the following elements:

- a common analysis of the humanitarian context, identifying the key concerns regarding humanitarian principles and violations of human rights;
- an analysis of needs, taking into consideration the capacities (ability to cope) and vulnerabilities (special needs) of the affected population. (The NAF can be summarised, and can be annexed in its entirety to the CAP document);
- best, worst and most-likely scenarios;
- stakeholder analysis (who is doing what, where);
- a clear statement of longer-term goals and objectives;
- prioritised response plans; and
- a framework for monitoring the strategy, and revising it if necessary.

² Examples include: UNMAS, UNAIDS, UNESCO, national NGOs, etc.

Consolidated Appeal (CA or CAP*)

A reference document for humanitarian, development, multilateral, national, bilateral and non-governmental communities on the humanitarian strategy, programme and funding requirements in response to a major or complex emergency or natural disaster. Consolidated Appeals are prepared following agreement by the Emergency Relief Coordinator (ERC) and IASC, in consultation with the UN Humanitarian Coordinator (UNHC) and the IASC Country Team, that an emergency is either complex or major and therefore necessitates an inter-agency, consolidated approach to strategic planning and resource mobilisation. The Consolidated Appeal is to be prepared according to the CAP Technical Guidelines.

(*Note: most people refer to a Consolidated Appeal as a CAP (see next paragraph), not a CA. That's OK as long as it's clear whether they're referring to the specific appeal or the underlying process.)

Consolidated Appeals Process (CAP)

In case of a major or complex emergency, *determined to be such by the IASC*, the UN Humanitarian Coordinator³ of the affected country initiates with the member organisations and standing invitees of the IASC (hereafter referred to as the IASC Country Team), and other relevant non-IASC organisations an *inclusive, coordinated programme cycle* of:

- strategic planning (leading to a Common Humanitarian Action Plan, or CHAP);
- resource mobilisation (which, together with the CHAP, makes the Consolidated Appeal or Flash Appeal);
- coordinated implementation;
- joint monitoring and evaluation;
- revision of the CHAP if necessary; and
- reporting on results.

This cyclical process, until the crisis and humanitarian needs end, is the CAP.

Flash Appeal (FA)

The Flash Appeal is a tool for structuring a coordinated humanitarian response and coordinating fundraising among participating IASC organisations for the first three to six months of an emergency. It is triggered by the UN HC, in consultation with the IASC Country Team and following endorsement by the Emergency Relief Coordinator (ERC) and the IASC. The government of the affected country is also consulted. (Note that its permission is not needed for the launch of a flash appeal.) The Flash Appeal is issued between week one and two of an emergency. It provides a concise overview of urgent life-saving needs, and may include early recovery projects that can be implemented within the timeframe of the Appeal. Please refer to Flash Appeal Guidelines for detailed instructions in processing Flash Appeals.

The Inter-Agency Standing Committee (IASC)

The IASC is formed by the executive heads of the following agencies:

Full Members	Standing Invitees
UNICEF	International Committee of the Red Cross
UNDP	International Federation of Red Cross and Red Crescent Societies
FAO	International Organization for Migration
WFP	Steering Committee for Humanitarian Response
WHO	InterAction
UNFPA	International Council of Voluntary Agencies
UNHCR	Office of the Special Representative of the S-G on IDPs
OCHA	The World Bank
	Office of the High Commissioner for Human Rights

The primary objectives of the IASC in complex and major emergencies are as follows:

³ Generally, the UN Humanitarian Coordinator (HC) and the UN Resident Coordinator (RC) are the same person and the CAP is led by that person in his/her capacity as HC. In countries where there is no HC, the RC will play this role.

- To develop and agree on system-wide humanitarian policies;
- To allocate responsibilities among agencies in humanitarian programmes;
- To develop and agree on a common ethical framework for all humanitarian activities;
- To advocate common humanitarian principles to parties outside the iasc;
- To identify areas where gaps in mandates or lack of operational capacity exist;
- To resolve disputes or disagreement about and between humanitarian agencies on system-wide humanitarian issues.

For more information see: <http://www.humanitarianinfo.org/iasc>.

IASC Country Team

mirrors the IASC structure at headquarters. It includes the UN humanitarian agencies that are members of the IASC plus the standing invitees to the IASC that are involved in the CAP at field-level.

Indicator

A piece of data or variable that signals whether a standard has been attained. They provide a way of measuring and communicating the impact or result of programmes, or at least the completion of the process, steps or actions of humanitarian programmes (hence 'impact indicator' vs. 'process indicator'). The indicators may be qualitative or quantitative. Examples include: Quantitative: "At least 15 litres of water per person per day is collected." Qualitative: "People are aware of the quantity and type of ration to be distributed for each distribution cycle, and reasons for any differences from established norms are provided." (from the Sphere Project). INDICATORS ARE KEY TO JUSTIFYING YOUR FUNDING REQUESTS.

Some background on the indicators used in the executive summary box:

It was decided to go back as far as 2004. This was partly in order to speed up the production of these tables, but also to give them a better sense of immediacy.

<p>➤ Population</p>	<p>For population, we initially searched first for a reference from a government site. If we couldn't find one, we went to the UN population division's 2006 report, which estimates population based on growth, like UNFPA's just released report. Unless the figure comes from a government census, all figures are estimates, but most governments for which we have a CAP do not maintain up to date population figures. The UNFPA SWP 2007 report is just the most recent population report out, but it bases its figure on projected population growth, and uses the population division's 2006 report as its baseline. Seeing as it is more recent, we will use this one.</p>
<p>➤ Under 5 mortality</p>	<p>We are using UNICEF statistics from their MICS system, which are updated yearly, go up to 2005, and we cross-checked with FAO which has a similar exercise. We would rather not use the UNFPA report's figures as they are estimates for the 2005-2010 period. Similarly, UNICEF's 2006 report on the world's children only uses data up to 2004.</p>
<p>➤ Life expectancy</p>	<p>The most up to date estimate comes from the UNDP HDI 2006</p>
<p>➤ Prevalence of undernourishment in total population</p>	<p><i>Undernourishment refers to the condition of people whose dietary energy consumption is continuously below a minimum dietary energy requirement for maintaining a healthy life and carrying out a light physical activity: FAO definition.</i></p> <p>This is also the basis for the millennium development goal. We use undernourishment as an indicator and FAO statistics as a source because we could not find reliable indicators for global, acute, or severe malnutrition, unless there were in the MYRs.</p> <p>WHO's indicators, are usually older than the cut-off date for these tables, and also more concentrated around certain population groups, such as women or children. This is often the case as well for the MYRs, which contain GAM or similar statistics for regions or groups.</p>

<ul style="list-style-type: none"> ➤ Gross national income per capita ➤ Percentage of population living on less than \$1 per day ➤ Proportion of population without sustainable access to an improved drinking water source ➤ IDPs (number and percent of population) ➤ Refugees <ul style="list-style-type: none"> ➤ In-country ➤ Abroad ➤ ECHO Vulnerability and Crisis Index score (V/C) ➤ 2006 UNDP Human Development Index score <p>Also ...</p>	<p>WHO does have some good information on their regional division websites, particularly for Africa, but, again, the data is either older than the cut-off, or adds nothing new to more recent sources.</p> <p>The World Bank Key Development Data & Statistics is the largest and most reliable source of key economic indicators, and is accurate up to 2005. All reports, even the UNFPA one, use these figures. Using the UNFPA, for example, as a reference only changes the date of the report, not the quality of the information. The World Bank is a better source to have and indicate.</p> <p>Harder to find. The UNDP HDR 2006 is as good a source as any.</p> <p>As above. The UNFPA report uses the statistics from WHO's 2006 report on access to water: the figures from that report are the same as the UNDP HDR 2006. It is more recent, but perhaps WHO might be more authoritative...?</p> <p>The three main sources used here are the MYRs, UNHCR, and the Internal Displacement Monitoring Centre. If the MYR have figures, we will not contradict them without checking with the country team.</p> <p>Self explanatory</p> <p>This is the place to put interesting and relevant country-specific information from the document into the table.</p>
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Objective

For CAP purposes, a sector objective is: A statement of a desired result to be achieved within a given time frame. Each objective should be SMART: Specific, Measurable, Achievable, Relevant and Timebound.

Strategic Monitoring

A process that enables assessment of the progress and effectiveness of humanitarian action as planned in a CAP, and may signal the need for its modification.

Strategic priorities and prioritisation

If your CHAP has a dual focus, addressing simultaneously acute humanitarian needs and more protracted, chronic vulnerabilities, you may want to state clearly which projects in each response plan relate to emergency relief and which are addressing the causes of vulnerability through transitional support actions. A clear distinction and prioritization of projects between emergency relief and transitional support helps donors (including CERF) to better target their funding according to their funding priorities.

CAP Best Practice:

<http://ochaonline.un.org/humanitarianappeal/webpage.asp?MenuID=7887&Page=1239>

WHICH PROJECTS GO INTO WHICH SECTORS

Note: Each project can have only ONE sector identification. If there is equal distribution of activity/funds among many sectors, only then choose “multi-sector.” This list of sectors is IASC-approved – do NOT make up new sector names or combinations.

Following is a list of typical projects found in each sector in CAPs over the years, in case you need guidance on which kind of project should be put in which sector:

Sector	Typical projects
AGRICULTURE	<ul style="list-style-type: none"> • Seeds & tools distribution (more broadly, provision of agricultural inputs, incl. fertiliser) • Livestock re-stocking • Seed / seedling / tuber propagation or diversification • Agricultural extension & training • Veterinary services • Pest control • Environmental management • Aquaculture⁴ • Coordination / information / early warning • Agricultural water systems (irrigation, wells)
COORDINATION AND SUPPORT SERVICES	<ul style="list-style-type: none"> • Emergency response funds • Support for coordinating bodies • Preparedness / planning / capacity-building • Humanitarian information • Telecommunications • Passenger & cargo air service • Joint logistics centres • Other common humanitarian services that are not sector-specific
ECONOMIC RECOVERY & INFRASTRUCTURE	<ul style="list-style-type: none"> • Food-for-Work / job creation / direct hire • Micro-finance & micro-enterprise development • Rehabilitation of infrastructure (road, rail, air, power, communications, water/sanitation,⁵ public buildings & markets, etc.) • Livelihoods • Skills training • Natural resource management • Support for demobilisation of ex-combatants and their dependents⁶
EDUCATION	<ul style="list-style-type: none"> • Food-for-work (for school construction or teaching) • School construction • Materials supply • Support to teachers • Teacher training • Temporary learning facilities • Peace / reconciliation education
SHELTER & NON-FOOD ITEMS	<ul style="list-style-type: none"> • Temporary shelter, with associated transport & logistics • Distribution of non-food (household) items or resettlement / repatriation packages, with associated transport & logistics • Stockpiling / pre-positioning of NFI • Post-emergency / semi-permanent shelter
FOOD	<ul style="list-style-type: none"> • Food distribution • Food-for-Work • Monitoring of food security / livelihoods / nutrition • School feeding • Support for logistics of bulk food (e.g. transport, port facilities) • Buffer stocks

⁴ Some fishing projects are also designated as Agriculture in FTS, but these more properly belong to Economic Recovery & Infrastructure.

⁵ By custom, these large-scale projects are usually considered as “infrastructure” by FTS. Smaller-scale, community-level projects are designated as “water & sanitation.”

⁶ Sub-group commentators found DDR itself acceptable as humanitarian action, but not the (typical) ensuing phase usually called ‘socio-economic reintegration’ of ex-combatants.

Sector	Typical projects
HEALTH	<ul style="list-style-type: none"> • Direct (temporary) provision of primary health care⁷ • Support for (re) establishment of permanent PHC provision (incl. Rehabilitation, training, materials provision) • Direct or indirect provision of secondary health care • Supplementary and therapeutic feeding⁸ • Health extension & education / preventative health care • Environmental health (e.g. vector control) • Training / capacity-building • Health & nutritional surveillance • Reproductive health / MCH • STI & HIV/AIDS prevention and treatment • Medical and psycho-social response to sexual/gender-based violence • Mental health / psycho-social interventions • Vertical disease control (e.g. malaria) / Emergency response to acute outbreaks or epidemics • Immunisation • Treatment and support for disabled persons • Safe blood transfusion • Psycho-social support / mental health
MINE ACTION	<ul style="list-style-type: none"> • Mine awareness / mine risk education / prevention • Mine victim assistance • Mine surveying • Mine clearance • Training / capacity building / institutional support • Mine action coordination • Mine action response funds
MULTI-SECTOR⁹	<ul style="list-style-type: none"> • Multi-sectoral assistance to refugees or IDPs • Emergency preparedness; early warning systems; pre-positioning • Repatriation / resettlement / reintegration • Livelihoods support • Other multi-sector or miscellaneous
PROTECTION / HUMAN RIGHTS / RULE OF LAW	<p data-bbox="475 1126 1407 1261"><i>NOTE: There is a recent tendency to list large-scale projects providing broad material assistance (food, shelter etc.) in the "Protection" sector. However it is preferable to list these in "Multi-sector," and restrict the Protection sector to more specialised activities against physical threats, persecution or deprivation of rights, like the following:</i></p> <ul style="list-style-type: none"> • Protection of civilians / IDPs / refugees / repatriates • Prevention and treatment of violence • Child protection • Advocacy, monitoring, training & capacity-building for human rights / IHL / IDP Guiding Principles / Convention on the Rights of the Child • Legal aid / clinics • Land and property rights (e.g. for IDPs) • Education and training in culture of peace and conflict resolution • Prevention of & combating impunity for sexual/gender-based violence • Media / reporting • Birth registration • Civic education • Support for law enforcement & judiciary • Family tracing and reunification • Reconciliation / Peace-building & peace promotion / conflict prevention¹⁰ • Monitoring conditions of detention / upholding minimum standards and IHL in prisons

⁷ ICRC's terminology, "Substitution of Services," may be illuminating here.

⁸ Supplementary feeding is targeted at the food-insecure; therapeutic feeding, which requires medical prescription and supervision, is targeted at acutely malnourished individuals, usually children.

⁹ By custom, many UNHCR projects are designated as "multi-sector," because refugee/IDP care and repatriation tend to be multi-sectoral by nature. The majority of "multi-sector" projects on FTS are therefore refugee/IDP-related.

¹⁰ This refers to typically small-scale community-level activities, rather than armed activities such as peacekeeping and disarmament, which are never counted as humanitarian.

Sector	Typical projects
SECURITY (for aid operations)	<ul style="list-style-type: none"> • Security of humanitarian staff and operations (these tend to be unitary projects typically including: establishment of security offices, deployment of security officers, communications)
WATER AND SANITATION	<ul style="list-style-type: none"> • Emergency / temporary water supply and sanitation (as in new IDP or refugee camps or in face of outbreak of water-borne disease) • Water treatment (e.g. with chemicals) • Medium- or long-term community water supply and sanitation (as in resettlement zones or long-term IDP or refugee camps) • Capacity-building / institutional support • Water quality testing / surveillance • Drought preparedness

USEFUL WEB SITES FOR STRATEGIC MONITORING DATA & STATISTICS

Disaster management & awareness

[CREED - Centre for Research on the Epidemiology of Disasters](#)

[International Strategy for Disaster Reduction](#)

[ISDR Terminology](#)

[Reuters AlertNet - Humanitarian stats](#)

Displacement

[IDMC Internal Displacement Monitoring Centre](#)

[IOM](#)

[UNHCR - Statistics](#)

[UNHCR - The UN Refugee Agency](#)

[World Migrant Stock The 2006 Revision](#)

Environmental

[Drought Indices](#)

[EarthTrends](#)

[IPCC](#)

[Pew Center on Global Climate Change](#)

[SAWS Drought Monitoring Desk](#)

[The Forest Stewardship Council](#)

[UN Environment Management Group](#)

[Understanding and Defining Drought](#)

[UNDP Energy and Environment](#)

[UNEP - Climate Change](#)

[UNEP-GRID-Arendal](#)

[WMO](#)

[World Resources Institute](#)

Health

[DHS](#)

[UNICEF - Monitoring and statistics MICS](#)

[WHO Core Health Indicators](#)

[WHO infant & U5 mortality](#)

[WHO](#)

[WHOAFRO Country Health Profiles](#)

Humanitarian

[Cluster Approach](#)

[DFID Country Profiles](#)

[Humanitarian Policy Group](#)

[Humanitarian Practice Network](#)

Nutrition

[FAO CFSAMs](#)
[FAO Food Security Statistics](#)
[FAO Statistics Division](#)
[FSAU integrated food security](#)
[GIEWS on Food and Agriculture](#)
[HPG nutrition paper](#)
[Standing Committee on Nutrition](#)
[WFP](#)

Political, Governance & Development

[CIA - The World Factbook](#)
[Encyclopedia of the Nations](#)
[Globalis - an interactive world map](#)
[HDR HDI tables](#)
[Human Development Report 2006](#)
[List of countries by Human Development Index - Wikipedia, the free encyclopedia](#)
[List of countries by population - Wikipedia, the free encyclopedia](#)
[ODI - Humanitarian Policy Group](#)
[ODI - Humanitarian Practice Network](#)
[Overseas Development Institute](#)
[WB Worldwide Governance Indicators](#)

Security

[Chatham House](#)
[CIDCM Home](#)
[Failed States Index 2007](#)
[FfP The Twelve Indicators of CAST](#)
[Human Security Report](#)
[ICG](#)
[Institute for Security Studies South Africa](#)
[ISN Security Watch](#)

SPHERE & SMART

[SMART indicators](#)
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Statistics

[Data & Research](#)
[MDG home](#)
[Statistical Sites on the World Wide Web](#)
[UN Statistics Division](#)
[UN Stats Millennium Indicators](#)
[WB Key Development Data & Statistics](#)

[English-French Dictionary lookup](#)
[timeanddate.com](#)
[Wikipedia](#)
[WorldTimeServer.com](#)