



POSITION OF THE GLOBAL NUTRITION CLUSTER ON PROVIDING TECHNICAL SUPPORT TO COUNTRY CLUSTERS

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**Save The Children and the Global Nutrition Cluster funded
by UNICEF**

Acknowledgements

This report was prepared by Save the Children under the supervision of the GNC by Jacqueline Frize and Geraldine le Cuziat, after consulting a wide range of stakeholders. The consultants through Save the Children worked with the GNC partner agencies to determine the content of this report and gained endorsement of the report from the GNC Strategic Advisory Group before finalisation.

SUMMARY

This report aims to inform decision making around what the **technical role** of the Global Nutrition Cluster (GNC) should be. This is in direct response to a specific request after the March 2015 annual meeting to find a way of addressing issues of operational nutrition in emergency areas for which there is no existing normative guidance. Participants confirmed that the GNC collective have a role in engaging in Nutrition in Emergencies (NiE) technical issues and that there was a need to specify this role more clearly. This report provides an overview of how country nutrition clusters are organised to identify and address technical issues and to deal with technical gaps using both in-country and external expertise. A specific set of recommendations are included for members of the GNC Task Force on the Technical Role of the GNC Collective that is due to be convened by the GNC-Coordination Team (GNC-CT).

The findings are based on a secondary data review; an online survey for Nutrition Cluster Coordinators (NCCs) and Information Management Officers (IMOs); a country consultation visit to Mali, and remote consultations with Myanmar and Turkey/Syria; 31 key informant interviews; and a consultation session during the GNC annual meeting in Nairobi in October 2015.

Technical role of the GNC collective

The first finding is that there is **no clear definition of technical role** in relation to global level cluster work and that this leaves this function open to interpretation by different sector clusters. The working definition of technical role used in this report was taken from the 2013 Global Nutrition Cluster Governance Review, which uses three classification categories: *technical guidance*, *technical training* and *technical support*. *Technical guidance* and *technical training* were found to be more easily understood concepts among those consulted. *Technical support* was found to be understood as a generic term for responding to ongoing, context-specific field level requests for technical clarity in the absence of normative guidance, as well as help in making existing guid-

ance operational in the emergency context. There was therefore a very wide interpretation of the term technical support. The GNC-CT is increasingly feeling the need to respond to this third type of *technical support* request on issues such as surveys and delivery of trainings at country level, as well as offering technical advice where there is an *operational technical grey zone*¹ during emergency lifesaving responses in the absence of a more responsive mechanism that meets field level needs.

Technical needs of the country nutrition clusters

The existence of a wide range of Technical Working Groups (TWGs) at country level indicates that this is a mechanism that can potentially address context-specific technical issues. However, failing TWGs are not necessarily detected and this issue should be explored in more depth. There is no systematic way of classifying NiE technical areas or specific technical issues within each technical area. The majority of the technical areas addressed successfully in-country are the ones for which there is more technical guidance available like Community-based Management of Acute Malnutrition (CMAM), assessment and emergency preparedness, whereas technical areas not addressed included cash and voucher programmes, transition to recovery/scaling down and joint ways of working with other sectors. Key informants had variable views on the priority NiE gaps that should be addressed globally and believed country level solutions were often the most appropriate and realistic way of addressing technical gaps. These technical gaps include lack of capacity, in terms of lack of knowledge and lack of knowhow to put existing guidance into practice, as well as lack of normative guidance on operational issues.

1. *Operational technical grey zone* is used to refer to technical areas of nutrition in emergencies for which there is no normative guidance throughout this document.

The level and scope of engagement of the GNC and country nutrition clusters in NiE

The findings indicate that there are three main characteristics particular to country clusters that directly affect their ability to resolve technical issues in country: i) life-cycle stage of the cluster; ii) type of technical role being played; and iii) main method for escalating the technical gap from the country level. Channels for escalating technical expertise requests are at present informal and likely to differ when there is a fully dedicated NCC who tends to use GNC-CT lines of communication or an NCC that is also carrying out a UNICEF-specific function (double-hatting) who tend to use UNICEF office structure lines of communication. When there is no NCC the channel again is different with headquarters of different agencies having a prominent role. Any model for raising and delivering technical support will need to accommodate the diverse nature of the country nutrition clusters and levels of technical experience of its membership. When the presence of international actors is low at country level, increased regional and global support may be required.

How the GNC/country clusters collaborate to meet the technical needs

The current collaboration between the GNC collective and country nutrition clusters is based on networking and often bypasses UNICEF's technical support structures. There is no current system to track what **technical issues** (support, capacity building and guidance) UNICEF or any other external actor successfully provides support for or the issues that remain unresolved. The current system misses out the advantages of regional expertise of UNICEF and the collective partners who have regional presence. The NiE sector provision of technical support is not explicitly linked to a broader technical role strategy that harnesses operational training, research and learning.

Possible models for escalating technical NiE gaps from country levels

All key informants interviewed were clear that the GNC-CT had no legitimacy to be endorsing operational guidance on its own, but they were less clear as to how the operational technical gap should be addressed. Five possible models for raising and addressing technical gaps at country level are presented, ranging from a model where the GNC has no technical role and leaves this to the Cluster Lead Agency (CLA), to models with increasing levels of responsibility for acting as a conduit to raise and advocate for technical gaps to be addressed, to models of providing a centralised service with additional funds. These models need to be looked at in more depth by the GNC Task Force on Technical Role through a Strengths, Opportunities, Weaknesses and Threats (SWOT) analysis.

Summary conclusions and recommendation

The NiE sector is missing an overarching technical platform that can provide strategic direction on how to prioritise and address technical capacity gaps at country level and this means that the GNC-CT is at risk of filling that gap in the absence of any other system². This was seen to be very time-consuming for the GNC-CT in 2010-11 when capacity building and training modules were being developed and rolled out³. There is currently no clarity on how the GNC partnership should address gaps in technical training, technical guidance and technical support, nor is there a clear system for addressing technical operational gaps with an agreed level of legitimacy to respond to country level emergency nutrition responses. This has led to an ad-hoc system based on networking and different models of linking in country, regional and global technical expertise. The GNC collective needs to position itself on its technical role (training, guidance and support) provision, and be prepared to invest considerable time and resources to achieve this well and not expect the GNC-CT to fill the gap.

The main report includes **20 specific recommendations** addressed to UNICEF as the CLA and the GNC partners. The main recommendations are summarised on the next page:

2. The GNC formally raised the issue of this technical NiE vacuum in 2013 through letters to SUN, FAO, UNICEF, WFP and SCN advocating for a mechanism for harmonisation policy and guidance for nutrition in emergencies.

3. A two year ECHO funded capacity building project involved a number of technical capacity building initiatives including the development and roll out of trainings.

Main recommendations for immediate action by the GNC task force on the technical role:

- Agree on a working definition of *technical role* to promote the work of the GNC at country level for an improved and effective response.
 - Collectively acknowledge and address the existence of an *operational technical grey zone* for NiE responses that require interim operational guidance in emergency contexts and which cannot wait for the development of normative guidance.
 - Develop a systematic classification system for articulating technical operational NiE issues that can be used by all NiE practitioners which allows for an evidence-based compilation of technical issues and gaps.
 - Identify a lead with the specific function of tracking technical operational gaps according to the agreed classification system for NiE technical issues.
 - Carry out a SWOT analysis of the models for providing technical support presented in this report.
- Put in place a mechanism with the GNC-CT to account for the quality of the delivery of country cluster level TWGs.

Main recommendations for UNICEF as cluster lead agency:

- Take the lead on the systematic global provision and roll out of the NiE training to practitioners, including UNICEF staff.
- Commit to additional financial and human resources to ensure adequate support for technical capacity on the ground that adequately reflects the separation of duties between technical support and the coordination role of dedicated NCCs.
- Ensure the provision of increased technical CLA expertise at country level to country nutrition clusters and to support NCCs to escalate requests to regional/head office levels when appropriate as the CLA.

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Acronyms

BMS	Breastmilk Substitute
CDC	Centre for Disease Control
CLA	Cluster Lead Agency
GNC	Global Nutrition Cluster
GNC-CT	Global Nutrition Cluster – Coordination Team
GNC Collective	GNC-CT, UNICEF as CLA, and global partners
HPC	Humanitarian Programme Cycle
HTP	Harmonised Training Package
IASC	Inter Agency Standing Committee
IFE	Infant Feeding in Emergencies
IMAM	Integrated Management of Acute Malnutrition
IMO	Information Management Officer
INGO	International Non-Governmental Organisation
IYCF-E	Infant and Young Child Feeding in Emergencies
MAM	Moderate Acute Malnutrition
MOU	Memorandum of Understanding
MNP	Micronutrient Powder
MUAC	Mid Upper Arm Circumference
NCA	Nutrition Causal Analysis
MUAC	Mid-Upper Arm Circumference
NCA	Nutrition Causal Analysis
NCC	Nutrition Cluster Coordinator
NiE	Nutrition in Emergencies
RRT	Rapid Response Team
TOR	Terms of Reference
TWG	Technical Working Group
SAG	Strategic Advisory Group
SOP	Standard Operating Procedure
SWOT	Strengths, Weaknesses, Opportunities and Threats
UNICEF	United Nations Children’s Fund
UNSCN	United Nations Standing Committee on Nutrition
WFP	World Food Programme
WFH	Weight for Height
WHO	The World Health Organisation

Operational technical grey zone refers to technical areas of NiE for which there is no normative guidance.



1.

RATIONALE

This report aims to inform decision making around what *technical role* the Global Nutrition Cluster (GNC) should have in order to fulfil its function under the Humanitarian Reform⁴. It provides the background information and analysis required by members of the GNC collective part of the Task Force on the Technical Role that is due to be convened by the GNC-Coordination Team (GNC-CT), along with a set of specific recommendations.

The GNC collective is made up of the GNC-CT, UNICEF as the Cluster Lead Agency (CLA) and global level nutrition partners.

During the March 2015 GNC annual meeting in Geneva, issues around *operational grey zones* and technical operational capacity in Level 3 emergencies such as Ukraine, Syria and the Philippines, led to the agreement that a Task Force should be formed to:

- i) Discuss the role of the GNC collective on technical issues, and
- ii) Provide recommendations on ways in which the GNC partners could organise themselves to address technical operational gaps.

Whilst the core function of the GNC to improve preparedness and coordination for effective humanitarian response has been clear to all since the 2013 GNC Governance Review, the operational feasibility of this core function is again being questioned. This is particularly true in emergencies where technical Nutrition in Emergencies (NiE) capacity at the country level is low and where there is limited nutrition actor presence. There is still overall low coverage of the nutrition response

against the set cluster target as demonstrated in a number of countries. These concerns were also raised in the March 2015 GNC annual meeting due to the increasing number of technical gaps being identified at country level. The current GNC Standard Operating Procedures (SOPs), state how technical issues or queries should be communicated within the GNC (see Box 1). At present there is no overview of the extent this mechanism has been used.

This review provides an insight into how nutrition clusters are organised at country level, the technical issues and gaps arising and ways of addressing them, as well as recommendations on how to move forward. This report is a reflection of the Terms of Reference (TOR) objectives.

The specific TOR objectives:

1. Identify what the technical needs are of the country clusters;
2. Review the level and the scope of engagement of the GNC and country clusters in NiE programming at global and country level;
3. Define how the GNC/country clusters collaborate to meet the needs.

4. At the global level, the aim of the cluster approach is to strengthen system-wide preparedness and technical capacity to respond to humanitarian emergencies by ensuring that there is predictable leadership and accountability in all the main sectors or areas of humanitarian response. [https://www.humanitarianresponse.info/system/files/documents/files/IASC%20Guidance%20Note%20on%20using%20the%20Cluster%20Approach%20to%20Strengthen%20Humanitarian%20Response%20\(November%202006\).pdf](https://www.humanitarianresponse.info/system/files/documents/files/IASC%20Guidance%20Note%20on%20using%20the%20Cluster%20Approach%20to%20Strengthen%20Humanitarian%20Response%20(November%202006).pdf).

BOX 1

Communication around technical issues or queries, GNC SOP

*"In case of a **technical issue or query**, GNC partners are to communicate with the GNC-CT via email or phone for clarification. In case the issue requires further discussion and consultation with the SAG, it will be included in the agenda for the monthly SAG call or an urgent SAG call will be conducted if necessary.*

*If the issue requires **technical input from outside of the GNC**, the GNC-CT will invite partners with technical expertise and experience on the matter to deliberate on the issue through a conference call and the information on the consensus reached will be shared with all through an email and/or in the next monthly GNC partners call. It is also possible for the SAG to directly raise an issue with the GNC-CT, upon consultation, if it is found that the issue needs collective deliberation of the members, this will be communicated to the respective partners so that a call is arranged around the issue to be resolved."*

Source: Section 9.2 GNC Standard Operation Procedures, p 11

The SOP therefore has a very narrow definition of how the GNC should address technical issues, as there is no reference on guidance and training, it is more about how technical queries should be identified, communicated and addressed.

2.

BACKGROUND / INTRODUCTION

UNICEF, as CLA for the GNC since its creation in 2006, has overall responsibility for taking on a leadership role within the international humanitarian nutrition community to ensure adequate response and high standards of predictability, accountability and partnership. It also takes on the commitment to act as the *provider of last resort* in NiE where this is necessary⁵. This has very recently been reinforced by UNICEF in its 2015 publication for country offices⁶.

The GNC-CT is responsible for the day-to-day management around cluster coordination and information management at global level. The work of the GNC requires working through the collective global level partnership formed between the GNC-CT, UNICEF as the CLA, and the nutrition cluster global level partners. The Interagency Standing Committee (IASC) cluster structure is therefore made up of sector experts who, through partnership, aim to improve the overall humanitarian response through sector specific expertise. The creation of clusters around sectors of expertise naturally means the inclusion of technical components in all the work clusters do.

In the absence of a technical platform⁷ for NiE over the last 3 to 5 years⁸, the GNC collective has often looked to the GNC as a forum for sharing of technical expertise. For example, in the early days of the GNC, the NiE Harmonised Training Package (HTP) was developed through the GNC to ensure technical NiE training guidance was available and then the United Nations Standing Commit-

tee on Nutrition⁹ (UNSCN) was asked to host the materials in one single place for the GNC partnership to use, with the aim of improving programme quality. In 2011, the GNC collective created an *Identity Ad Hoc Group* to seek clarity on how technical expertise contributions by the GNC collective should be classified (see annex 3), again indicating the technical nature of the GNC collective's partnership. A look at the content of the GNC annual meetings clearly indicates that technical issues are still high on the agenda of cluster partners (see annex 3 for more details of technical updates included in GNC meeting agendas). The GNC SAG acknowledge that drawing up the GNC meeting agendas always includes decision-making around the inclusion of technical updates and is a constant dilemma competing with other issues.

While the GNC 2014-2016 strategic priorities focus on ensuring stronger coordination for more effective humanitarian response, recent emergencies in Syria, Philippines and Ukraine have raised questions on what the technical role of the GNC collective is, and should be, when there are serious technical capacity gaps at country level. This is especially true of contexts where international actors are not operational due to security constraints and where there is an increased use of national actors with limited NiE experience. New approaches and ways of working when access to affected populations is limited, and when nutrition surveys and Community based Management of Acute Malnutrition (CMAM) are not the standard responses, have required renewed efforts to define and

5. http://www.who.int/hac/techguidance/tools/manuals/who_field_handbook/f1.pdf

6. Cluster Coordination Guidance for Country Offices, United Nations Children's Fund (UNICEF), 2015.

7. The role of the Standing Committee on Nutrition as a technical forum for Nutrition related matters has changed over the last 5 years, leaving a vacuum.

8. There has been a gradual reduction in the role of the Standing Committee for Nutrition

9. http://www.unscn.org/en/gnc_htp/howto-htp.php

harmonise programmatic approaches at country level when normative guidance is not available.

The creation of Technical Working Groups (TWGs) at country level to address these operational technical issues works well, with established country clusters made up of country cluster members with both NiE and local context experience. The model is less successful in newly set up country clusters with no prior nutrition sector working groups and with limited, and sometimes no, NiE experience whatsoever. The current state of play is that some technical issues are not being identified at country cluster level due to lack of local capacity. Where technical issues are identified and cannot be resolved in-country, the membership directs them externally to the GNC-CT, CLA or other technical forums such as the Infant Feeding in Emergencies (IFE) Core Group or En-net. This system is being questioned as failing to put the GNC collective to best use.

The TWG mechanism at country level is therefore specifically designed to ensure service delivery. Specific TORs are developed at country level for TWGs as part of the coordination functions of the country nutrition cluster led by the Nutrition Cluster Coordinator (NCC). These TWGs are time-bound and task-oriented, and perform a number of similar functions in their different operational contexts¹⁰. While TWGs are the country level mechanism for addressing technical issues, there is no parallel TWG mechanism at global level, although the GNC SOPs cater for setting up a specific Task Force to address technical issues with global expertise. This option has not been used (see annex 3 for more historic information on the GNC involvement in technical outputs).

The current IASC/GNC setup for monitoring the specific performance of country level TWGs is currently limited to their existence and levels of participation of its members. This leaves the responsibility for technical aspects at country level and raises the questions of accountability, quality and standards throughout the cluster system as a whole within the Humanitarian Programme Cycle (HPC). Harmonisation of approaches and monitoring the cluster members' response require the NCC to delve into technical capacity issues and sometimes take decisions to achieve cluster level milestones. While a functional TWG can support the NCC to achieve this, technical gaps and lack of technical agreement have at times been a stumbling block for effective coordination at country level. The extent of this is explored in this review.

10. TWG TOR tasks: Harmonization of guidance; Provision of technical support to cluster partners on specific technical areas; Advising the country level Strategic Advisory Group (SAG) on issues related to the implementation; Compliance on the agreed standards and guidelines; Follow up of technical and policy issues raised within the cluster forum; Identification and discussion on capacity gaps; Developing strategies for improving the monitoring, evaluation and delivery of services; Discussion on implementation challenges, and Discussion around guidance for collaboration within the cluster and other clusters.

3.

METHODOLOGY

This review was carried out by a team of two consultants on behalf of Save the Children over a period of 44 days starting on 15 September (see TOR in annex 1).

In the absence of a clear definition for “technical role” in relation to global level cluster work, the authors have used a working definition taken from the 2013 GNC Governance Review (Box 2), which uses three broad categories.

BOX 2

Technical role¹¹ working definition for this report

Technical support

Responding to questions and queries from NCCs; this is a reactive function.

Technical training

Offering teaching/instruction on technical aspects of NIE; this is proactive.

Technical guidance

Filling gaps in policies and guidelines regarding NIE approaches.

Source: GNC Governance Review, Gostelow 2013

In line with the TOR, the review consisted of six distinct steps that fed into the writing of this report.

STEP 1

Desk review

A desk review of relevant documents provided by the GNC-CT was carried out (see annex 2). Additional documents were collected during interviews and country level consultations.

STEP 2

Country consultations (20 September – 6 October)

Criteria for two country level visits and two remote consultations were devised in consultation with the GNC-CT. The main selection criteria for country consultation selection included the level of emergency and complexity of the crisis, the history of the cluster, the security context and the working language in country. Mali and Myanmar were prioritized for country visits, and Afghanistan, Bangladesh, Turkey/Syria and Somalia were considered as back-ups and contacted for remote consultation possibilities. The GNC Coordinator approached NCCs at country level to request support for a 2-3 day country visit on 18th September.

11. Operational research was not considered in this definition of Technical Role.

One country visit took place to **Mali** on 5-7th October. No other country had the time to accommodate a country visit so remote consultation with NCCs and TWGs took place for **Myanmar** and **Turkey/Syria**. The feasibility of a country visit was very much limited by the 2-week timeframe available for the consultation.

STEP 3

Online survey for NCCs and IMO (24 September - 6 October)

A 46 question online survey was designed and sent by the GNC-CT to NCCs and IMOs in 26 countries where clusters/sectors¹² are activated (see annex 4). The survey consisted of four main sections i) respondent profile; ii) country cluster characteristics; iii) technical areas in NiE addressed; and iv) opinions on models of delivery of technical expertise. One Rapid Response Team (RRT) staff acting as an NCC was included in the survey. The remaining RRTs were not consulted through the online survey, even though their role as temporary NCCs and IMOs at country level is acknowledged, as their timeframe in this role are usually short while longer-term human resource capacity is being found.

Twelve technical areas were identified for the purposes of this review based on the main programmatic NiE areas: 1. Assessments, surveys and studies; 2. CMAM / Integrated management of acute malnutrition (IMAM); 3. Infant and young child feeding in emergencies (IYCF-E); 4. Selective Feeding Programmes¹³; 5. Cash Transfers / Vouchers; 6. Micronutrients; 7. Nutrition Information Systems and Surveillance Systems; 8. Emergency Preparedness and Contingency Plans; 9. Epidemic outbreaks; 10. Joint ways of working with other sectors (food security, health, WASH); 11. Transition to post emergency and recovery; and 12. Technical support for cross cutting themes. A thirteenth category "other" was also used to capture any additional technical areas.

STEP 4

Key informant interviews (24 September – 23 October)

Forty representatives from a wide range of nutrition cluster members and observers were contacted for

individual interview to explore their understanding and experience of providing technical expertise for the global and country clusters in nutrition in emergencies. Key informants included UN agencies, INGOs, donors, individuals, academic institutions and technical fora, as well as the GNC-CT, some NCCs and RRTs. The individuals and agencies were selected because of their particular role relating to the subject of this review, and were interviewed according to their availability in the allocated timeframe.

In addition the global level coordinators for the health and WASH clusters and the Child Protection Working Group were also interviewed because of their sector link with the underlying causes of malnutrition and/or because they share UNICEF as their CLA.

STEP 5

SAG update (9 October)

A written update report on progress was provided for the SAG members who then provided inputs for step 6.

STEP 6

GNC face to face presentation and working group session, (14 October, Nairobi)

Preliminary findings of steps 1 to 4 were presented during the GNC annual meeting in October 2015 with a focus on the online survey results. A 30 minute presentation in plenary was followed by a group working session designed to obtain collective feedback from partners and "ascertain the level of agreement on the role of the GNC collective in technical nutrition work in support of country level clusters¹⁴."

This report includes the findings and recommendations stemming from the above steps. Comments from the GNC-CT and SAG have been incorporated. All tools developed and additional findings have been included as annexes. The **annexes** provide much of the background documentation needed to interpret the trajectory of the technical role of the GNC collective and should be considered as a key reference document for this topic.

12. At country level, the implementation of the cluster approach varies significantly; even the use of the word "cluster" is not systematic. In Sudan, Nigeria, Northern Syria, Kenya, Myanmar and Mauritania the word "sector" is used.

13. Selective Feeding Programmes are a subset of CMAM, however listed here separately because of subject headings used in the HTP modules and NiE competency framework.

14. Refer to GNC annual meeting report for session content details see <http://nutritioncluster.net/wp-content/uploads/sites/4/2015/06/2015-GNC-Annual-Meeting-final-report-Nairobi.pdf>

Limitations:

The limitations encountered during the consultancy are mainly the time constraint and are concept related.

- The consultancy time schedule was heavily frontloaded with the bulk of the data collection being carried out in the first 3.5 weeks of the consultancy, in time for the 14 October presentation at the GNC annual meeting.
- The 6 methodology steps described above had to be carried out simultaneously and left very little time for analysis between steps.
- Time constraints limited the GNC SAG level of involvement outlined in the ToR.
- The timeline for the country level consultations was unrealistic and the willingness of NCCs to participate made three of four consultations possible within a 10-day timeframe. A second in-country visit would have been valuable and added depth to the analysis.
- Question 14 of the online survey was excluded from analysis due to poor design.
- Some key documents for the secondary data analysis were accessed late in the reference document review process.
- The overall lack of agreed definition and common understanding on the term *technical role* is likely to have led to divergence of views.
- There was a tendency by many of those contacted to use the terms *GNC* and *GNC-CT* interchangeably, which is an ongoing cause of confusion.

4.

FINDINGS

This section outlines the overall findings under the three TOR specific objective headings. Given the different nature of the cluster set-ups at country level, the analysis focused on finding trends and generic findings rather than individual differences. The findings are based on the following:

- 1) Secondary data analysis.
- 2) 24 fully completed online survey responses (5 IMO and 19 NCCs) representing 21 countries out of 26 countries contacted (80% response rate¹⁵).
- 3) 31 NiE key informant interviews (see annex 4).
- 4) GNC SAG group interview.
- 5) Working group results from approximately 60 participants attending the GNC annual meeting in Nairobi on 14 October 2015.

4.1 Historical overview of the technical role of the GNC collective

The first finding is that there is no clear definition and common understanding of the term “technical role” in relation to global level cluster work. As explained in the methodology the authors have used a working definition

taken from the 2013 GNC Governance Review (Box 2). **Technical support is the subject of most of this report** and where appropriate technical guidance and technical training are specified to ensure clarity.

There is no clear guidance from the IASC on how to interpret the term technical role to guide cluster related work. This lack of clarity has led to different clusters choosing to interpret the global level cluster role in different ways¹⁶. This can be seen by the varying levels of technical support being given by different global level clusters at present, almost ten years since the Humanitarian Reform process began.

However, it is worth noting that the Technical Competency¹⁷ Framework for Nutrition in Emergencies Practitioners¹⁸ includes a list of 20 NiE technical competencies, 14 of which are nutrition activity/subject focused such as measuring malnutrition, surveillance and early warning and micronutrient deficiencies, and six of which are more generic (Humanitarian systems & standards; Coordination; Logistics; Advocacy and Communication; Reporting; and Capacity Development and Training). While these competencies relate to NiE staff levels of expertise to be able to perform NiE related work, it offers an alternative, and much broader, interpretation to the meaning of technical role for consideration by the GNC Task Force that will convene on this topic, as it acknowledges that NiE technical expertise includes the soft skills of coordination, communication, reporting and capacity building on NiE technical areas. The NiE competency framework interpretation places the technical expertise in an operational context, and is perhaps therefore closer to reality of what goes on at country level.

15. Non-respondents include Ukraine which has no NCC or IMO; Liberia, Malawi, Colombia and Nigeria.

16. Key Informant interview information.

17. *Competencies* can be defined as the knowledge, skills, capabilities and attitudes, or behaviours that are directly related to successful performance of a job.

18. GNC *Technical Competency Framework for Nutrition in Emergencies Practitioners*, DRAFT Version 1.0., July 2012

There is also a specific UNICEF NCC Competency Framework focusing on the core competencies needed by NCCs and IMOs. This framework focuses on four generic types of competencies (leadership & management; key competencies; team competencies and functional competencies) required to fulfil the NCC and IMO functions. Of the 38 competencies listed only one makes reference to “*Applying professional competence and mastery of general subject matter (e.g. M&E, Funds Management)*”, which in the case of NCCs could be translated to technical NiE mastery. UNICEF has invested in a plan on how to develop a training package to develop the NCC and IMO competencies, as these soft skills do not form part of most formal education courses, whereas mastery of a technical subject is considered to be accessible via formal education.

In the case of the GNC, there has been a gradual shift in strategic areas of focus for the GNC over three distinct

time periods, from development of technical material to support to country clusters (see annex 3 with more details). Whilst coordination and capacity development have remained constants over the years to meet gaps, there has been a change in the use of capacity building to mainly mean capacity for coordination functions in line with the GNC core function, and separate NCC training materials developed for this purpose. Technical guidance featured heavily in GNC collective activities between 2006 and 2009 and led to the creation of numerous NiE related tools at the start of the GNC life. There has been a marked change since the governance review recommendations in 2013, and these technical NiE role functions are now slotted under broader themes such as Operational and Surge Support Coordination, and are therefore less visible and less obviously recognisable as NiE technical capacity issues. Table 1 below summarises this change of focus by phases.

TABLE 1

Historical overview of GNC collective¹⁹ strategic areas focus (see annex 3 for more details)

	2006-2009	2010-2013	2014-2015/16
1	Coordination and networking	Coordination, advocacy and resource mobilization	Partnership, communication, advocacy, and resource mobilisation
2	Capacity development	Policy, standards and guidelines	Capacity development in humanitarian coordination
3	Resource mobilization and supplies	Capacity development for humanitarian response	Operational and surge support to country clusters
4	Stewardship, <u>technical guidance</u> , preparedness, and monitoring and evaluation	Preparedness	Information and Knowledge Management
5		Assessment, monitoring and information management	
6		Best practices and lessons learned	

¹⁹ Global Nutrition Cluster (GNC) Strategic Plan 2014-2016

Table 1 demonstrates what is to be expected with the creation of a new way of working, where there has been a gradual shift away from development of technical tools and guidance at the start of the cluster system towards performance and knowledge management focused activities (see annex 3 for more details). This appears to be the case for other sector clusters too. This shift is further reflected in the current roles and responsibilities attributed to the GNC collective in existing GNC SOPs where there is little reference to the technical role, other than the expectation that UNICEF as the CLA will ensure technical expertise to the three sectors it is the cluster lead for (see Box 3).

BOX 3

The technical role of the CLA, GNC standard operating procedures

*The GNC is first and foremost a coordination mechanism. The GNC's **core purpose** is to enable country coordination mechanisms to achieve timely, quality, and appropriate nutrition response to emergencies. The GNC supports country coordination in strategic decision-making, planning and strategy development, advocacy, monitoring and reporting, and contingency planning / preparedness²⁰.*

UNICEF as Cluster Lead Agency

UNICEF is ultimately accountable for ensuring the fulfilment of the CLA responsibilities in the Nutrition Cluster to the Emergency Relief Coordinator. These responsibilities include (among others):

- *Ensuring that there is **technical expertise** and operational support to the Global Cluster Coordination Unit (a unit comprised of the Global Cluster Coordinators from all of the Clusters and Areas of Responsibility that UNICEF leads - Nutrition, Child Protection and WASH - located in Geneva, Switzerland), including website management and information and knowledge management capacities for the Nutrition Clusters at both global and country level.*

Source: Standard Operating Procedures and GNC website

Technical expertise: There is no clarity on the CLA support on technical issues, particularly in terms of when CLA technical support is for its programme as a cluster partner and where CLA acts as the 'provider of last resort' and supports all cluster partners in a technical role.

A 2015 UNICEF publication states more explicitly that *technical support* and *technical guidance* may be provided by cluster members at different levels. The scale and scope of the technical support and guidance is not specified:

*"Relevant cluster members, the CLA in country, the RO, or the Global Cluster may **provide technical support and guidance**"*

*"In priority countries where clusters are activated, the global cluster coordinators can also provide short-term surge support to **fill gaps and provide technical support** and capacity development if the country office and regional office resources are inadequate".*

Source: Cluster Coordination Guidance for Country Offices, UNICEF 2015.

The current GNC Strategic Plan for 2014-16 makes reference to how technical capacity gaps (that require technical training guidance and support) will be addressed under the Capacity Building Pillar 2:

*"The GNC will focus its capacity development efforts on skills most relevant to cluster coordination at the country level. **Where there is a gap in technical guidance or technical capacity, the GNC-CT will share details of existing resources and mechanisms and will advocate for partners with this capacity to fill and/or address these gaps.**"*

At the same time, there is a reference to GNC Rapid Response Team NCCs and IMOs being deployed to:

*"Provide **technical guidance** / coordination for nutrition cluster partners on the key technical nutrition intervention domains".*

All the above indicate the anticipation of technical gaps, the role of UNICEF as CLA to address them and the role of the GNC-CT as a conduit for raising technical gaps when implementing emergency nutrition responses, and advocating for them to be addressed without specifying the best ways of doing this. The reality is that the GNC-CT is increasingly feeling the need to respond to technical queries arising from the field during emergency lifesaving responses in the absence of a more responsive mechanism that meets field level needs. This mainly involves providing technical support but has in the past included taking the lead on technical training.

As the IASC cluster mechanisms and structures are rolled out worldwide, accountability for the humanitarian response is coming back to the forefront of the agenda and with that the need to identify who is best placed to ensure quality and standards are met when implementing

20. As articulated in the Transformative Agenda, the GNC also supports country clusters to coordinate service delivery for nutrition.

sector specific humanitarian responses. One key informant referred to this pendulum swing away from pure coordination issues as

“Coordination of bad programming is no good, so technical standards are key.”

The lack of clarity of the technical role in the IASC system allows individual cluster level interpretation, which, if well managed, can allow global cluster members to define the shape the technical role should take to suit their sector and realistic level of membership commitment.

KEY FINDINGS:

- There is no clear definition of **technical role** in relation to global level cluster work and this leaves this function open to interpretation by different sector clusters.
- *Technical guidance* and *technical training* are more easily understood concepts. *Technical support* is understood as a generic term for responding to ongoing context specific field level requests for technical clarity in the absence of normative guidance, which also helps in making existing guidance operational in the emergency context. This has consequences on the timelines for meeting field level needs and expectations when responding to emergencies, as interim operational guidance is often called for.

4.2. Identification of the technical needs of the country nutrition clusters

The analysis of the online survey for NCCs and IMOs, NCC interviews and the three country consultations helped to identify the technical needs of the country nutrition clusters.

Use of technical working groups

The use of TWG in country is a model whose success is directly related to the technical capacity and time availability of the TWG members. The online surveys and country consultations showed a very wide range of TWG in place in countries, with CMAM/IMAM, Assessment and IYCF TWG being cited most often. Less frequent TWGs include Communication, Advocacy, Capacity Development, Disaster Risk Reduction, Multi-sectoral interventions and Micronutrients reflecting the diversity of operational contexts and perhaps the level of engagement with broader nutrition actors such as the Scaling up Nutrition (SUN) movement in country (see Annex 6 Question 16).

Country level consultations allowed exploration on how the TWGs function in more depth, and revealed that there is considerable variance in how well they function. Not all TWGs have TORs and workplans. In one case, the TWGs were dormant for months and hence no longer functioning. In another case, the TWGs have only met a couple of times since their creation affecting partner motivation levels and a downward spiral of lower attendance and unsolved technical issues. These findings question the effectiveness of the TWGs, as there are no accountability mechanisms in place to detect when a TWG is not performing and failing to deliver. The extent to which this reflects all TWGs in all countries needs to be explored in more depth as this review only consulted with three countries.

Identification of technical NiE gaps (capacity gaps based on lack of knowhow)

Twelve technical areas were used for the purposes of this review based on the main programmatic NiE areas and a thirteenth category “other” was used to capture any additional technical areas. Key Informant interviews revealed views around the narrow focus of the current limited definition of NiE technical areas in the 22 HTP module topics that do not include the double burden of malnutrition, stunting and nutrition-sensitive approaches which are relevant to emergency contexts.

The online survey identified a large range of technical areas and specific technical issues arising at country level, and a very diverse approach to classifying them. There appears to be a blurred line at country level as to what constitutes a technical NiE expertise gap and what constitutes technical support around coordination. This means technical gaps are not articulated systematically.

Technical gaps are being raised in a number of ways, by cluster partners in cluster meetings or from bilateral discussions between partners (e.g. Breastmilk substitute (BMS) management, treatment for SAM in children > 5 years), or from sub national NCC/IMO levels, or from monitoring field visits carried out by UNICEF staff, or cluster partners, the Ministry of Health or even donors.

The ability of the cluster membership and corresponding NCC to articulate, raise and get technical NiE gaps put to the forefront of the cluster activities is critical to the success of the gap being identified and dealt with adequately. In some contexts, NCCs reported that they could be perceived as being weak by cluster members or by the Ministry of Health in country if they are unable to provide re-

sponses to technical NiE issues. Whilst at the same time, in other contexts, NCCs are being asked to take on technical roles for UNICEF to make up for lack of human resource capacity in country and are therefore often perceived as a strong additional NiE technical resource that should be tapped into, regardless of their TOR. The dedicated NCC therefore has a big role to play in the facilitation of how technical NiE gaps are addressed in country or using external expertise.

The online survey results indicate that the technical areas most likely to be addressed in country are CMAM, assessment and surveys, and emergency preparedness plans, as can be seen in Table 2 below. Technical areas not addressed include cash and voucher programmes, transition to recovery/scaling down and joint ways of working with other sectors. These answers are most likely linked to the amount of normative technical guidance available on these technical issues, with CMAM and assessment guidance being easily accessible unlike many of the other technical areas. The answers may also be an indication of UNICEF areas of expertise. This cannot be ascertained from the online survey methodology used for this review and deserves further exploration.

TABLE 2

Main technical areas identified at country level addressed in-country, with external expertise, or not addressed

Technical NiE areas addressed in country through in country expertise

74% of respondents were able to successfully address a **CMAM /IMAM** issue in country.

70% of respondents were able to successfully address an **Assessment, surveys and studies** issue in country.

69% of respondents were able to successfully address an **Emergency preparedness & contingency plans** issue in country.

65% of respondents were able to successfully address a **Nutrition information and surveillance** issue in country.

Technical NiE areas addressed in country through use of external expertise

48% of respondents indicated they had to resort to external expertise.

44% of respondents indicated they had to resort to external expertise for **assessment, survey and studies**.

30.4% of respondents indicated they had to resort to external expertise for **Emergency Preparedness & Contingency Plans**.

22% of respondents had to resort to external expertise for **Infant and Young Child Feeding in Emergencies**.

Technical NiE areas NOT addressed in country

35% of respondents were unable to address NiE issues related to **Transition from emergency to recovery**.

30% of respondents were unable to address NiE issues related to **Cash transfer programmes**.

26% of respondents were unable to address NiE issues related to **Joint ways of working with other sectors**.

26% of respondents were unable to address NiE issues related to **Technical support for cross cutting issues**.

Over 40 examples of technical NiE issues arising at country cluster level were collected within the aforementioned 12 technical NiE areas, and it is noteworthy that many specific technical issues raised were about how to put existing NiE guidance into practice, which is a technical capacity issue as the guidance exists but there is no knowhow on how to use it. The examples of specific technical issues collected have also brought to light that there is limited capacity at present amongst those consulted to articulate technical issues, which may be partly due to language issues or again a capacity issue showing varying levels of understanding of NiE issues²¹ (see annex 7 for the full list).

The online survey asked whether a mapping of available technical resources was available. 87% responded yes, and of those two thirds responded that it required updating. However country level consultations did not uncover the mapping. This remains an area to be investigated further.

Three country consultations with NCCs and members of TWGs

The consultations revealed that the number, level of involvement and technical capacity of cluster partners are critical factors in raising and addressing any technical issues. In the three countries consulted, no mechanism to track, prioritise and address technical issues was found, corroborating the findings of the online survey. It was also found that technical issues are not systematically tabled onto cluster meeting agendas, not even to include updates from the work of TWGs. It is also unclear where technical capacity issues are tabled in TWGs. Specific technical NiE issues identified during country consultations are presented in Table 3 and the key informants consulted are listed in annex 4.

TABLE 3

Examples of main technical issue gaps identified and ways of addressing them for 3 countries

Country	Country case study 1	Country case study 2	Country case study 3
Technical area	Micronutrient	IYCF-E	CMAM/IMAM
Technical Issue	Risk of excess micronutrient intakes for children receiving micronutrient powders and fortified food baskets.	Breastmilk substitutes (BMS) management in contexts of low breastfeeding rates.	National CMAM protocol not up to date and not aligned with 2013 WHO new recommendations.
Process	The NCC in collaboration with WFP and cluster partners looked at composition of micronutrient powders and product food basket provided to estimate level of consumption and upper limit recommended intakes. No TWG was formed – discussion and debate occurred in plenary of cluster meeting.	The NCC and IMO carried out secondary review of data and developed a mapping tool to track BMS untargeted donations. No TWG was formed due to low technical capacity of partners.	There has been a CMAM TWG in place since 2012 co-led by an INGO. No meeting took place from January to June in 2015. Monthly meetings have started again with the arrival of new NCC. Acknowledgment of gaps and shortcomings in the protocol by the cluster member. Low level of engagement of cluster member led to lack of harmonisation and approaches in the roll out and integration of CMAM into health system. Unable to find consistent minutes and action points for the period 2013-2014 – no meeting took place in 2015.

21. This list of specific technical issues was used during the face to face meeting in Nairobi to demonstrate what the field level requests are to the GNC collective, and have been tabulated in Annex 7.

Sought technical expertise in country/ outside	NCC did desk review on Google, accessed UNICEF document repository and guidelines. Contacted UNICEF Regional Office NIE focal point. Consulted national guidelines.	NCC and IMO looked on the web and contacted Save the Children IYCF-E Adviser.	Not able to say.
Ways forward	Decision made to continue distribution of Fortified blended food and review the decision in one years' time as per national guidelines.	Findings were presented to UNICEF and a member of the IFE core group as an advocacy tool to update the Operational Guidance on Infant and Young Child Feeding in Emergencies (IYCF-E) and the development of guidance for BMS management where artificial feeding is common.	The newly recruited NCC is looking at revitalising the 2 main TWGs (CMAM and IYCF-E) by ensuring TOR, deliverables and timeline.

Key informants

A surprising variety of answers was given by key informants to the question on what they believed the main technical gaps in the NiE sector to be. Most key informants believe that there is enough CMAM guidance and experience globally and in country now and that the next global operational gap is IYCF-E, reflecting the complexity of new emergencies context such as Syria or Ukraine where acute malnutrition is not a priority need of the affected population. Key informants however varied in their ability to pinpoint the top priority in terms of global technical gaps that need addressing. Academic and technical fora were more easily able to identify existing technical NiE normative and research gaps than other GNC actors.

Several interviewees mentioned the lack of emergency preparedness plan, which seems in contradiction with findings from the survey monkey where it was cited as being a technical issue addressed with in-country expertise.

KEY FINDINGS

- The existence of a wide range of TWGs at country level indicates that it is a mechanism that can potentially address context specific technical NiE issues. However, failing TWGs are not necessarily detected and this issue should be explored in more depth.

- There is no systematic way of classifying technical NiE areas or specific technical NiE issues within each area. The 12 categories used for this survey were understood differently by country level NCCs and IMOs. The clear articulation of technical NiE issues and the systematic classification of these is a key first step to being able to identify appropriate ways of addressing them.
- The majority of the technical NiE areas raised as having been addressed successfully in-country differ from the technical NiE areas that are not addressed at all, even using external expertise. There is a strong possibility that assessment, CMAM and emergency preparedness are the focus of most NiE responses and that other NiE areas are less systematically considered. There is considerable overlap in technical NiE areas addressed using in-country versus external expertise, most probably indicating the level of experience in country, the lifecycle stage of the cluster and the profile of the NCC.

4.3 Level and the scope of engagement of the GNC and country clusters in NiE programming at global and country level

The current engagement models found during the review are informal and people dependent, and thus fail to maximise the use of existing expertise. Whilst allowing some country nutrition clusters to get the support they require through effective networking, it leaves others less well served with external technical expertise.

Three main factors have been identified that help distinguish the likely engagement models between the GNC collective and country clusters:

1. Lifecycle stage of the cluster (a new start-up less than 6 months old, versus ongoing clusters in protracted or cyclical recurring emergencies).
2. The type of technical role being sought/played (support, training or guidance) and upward or downward nature of the information flow.
3. Main method for escalating technical expertise gap requests at country cluster level (existence of TWG and CLA role).

These are described in more detail below.

4.3.1. Lifecycle stage of the cluster (a new start-up less than 6 months old, versus ongoing clusters in protracted or cyclical recurring emergencies).

A fundamental characteristic is the lifecycle stage of the cluster in the emergency response continuum. The on-line survey showed a wide variety in the country cluster profiles, with 90% of them having sub-national level clusters and TWGs in place. Two of the country clusters (9.4%) were activated less than 12 months ago²², with half of the clusters operating for more than three years. Despite this longevity, only 36% had a SAG (see annex 6 for more details of the cluster profiles).

While it is expected that new start-ups require time to get a full cluster structure underway, the example of Ukraine sadly shows that a year after the start of the crisis, and despite surge capacity in the form of RRTs, there is still no NCC or IMO, or TWG in place in-country. The level of technical expertise in-country is said to be low and the cluster system has not been able to provide the necessary resources to ensure local actors have access to the tools and mechanisms needed for an effective and coordinated response. Table 4 provides some concrete examples for the country consultation.

TABLE 4

Examples of lifecycle stage of a newly activated cluster for 3 countries

Country case study 1	Country case study 2	Country case study 3
Cluster not activated but functioning as such due to recurrent emergencies with very limited involvement of the government. In addition to cluster group, there is a sector technical group including nutrition partners working in both development and humanitarian settings. Strong participation of the Government to the sector/technical group.	Cluster recently activated in 2015 after being a sub-working group under Health.	Cluster activated since 2012. There is some confusion around terminology to be used between Nutrition cluster & Nutrition thematic group. Two groups merged in 2014 while leadership of the group was back to the national authorities.
Nutrition technical expertise limited to 2-3 agencies but a co-ordination ethos is in place.	Very low technical capacity among cluster partners and high need for capacity building.	No other technical long-term nutrition group.
NCC position funded by UNICEF.	High turnover rate of NCC in complex settings. The NCC is unclear if funding is secured to continue with a dedicated NCC being provided by a partner.	Low involvement of cluster partners despite presence of strong technical players following 14-month vacancy of the NCC role.
	The CLA is in the process of recruiting someone who will double hat as a NCC and on programme.	NCC position funded by ECHO.

22. Note that no answers were collected from Ukraine.

4.3.2. The type of technical NiE role being played (guidance, training or support) and upward or downward nature of the information flow

There is a fair level of agreement that the GNC collective has a role to play in equipping country level nutrition actors with *technical guidance* and *technical training* to achieve the GNC vision²³. There is an implicit downward information flow where *technical guidance* is disseminated downwards to field level and likewise, *technical training* is often generated globally and rolled out at field level to increase capacity. However there is less agreement on the information flows and roles and responsibilities for the provision of *technical support*, which stems from the field level and is escalated upwards. Figure 1 below captures the general essence of the current information flows for the three types of technical role.

4.3.3. Main method for escalating technical NiE expertise gap requests at country cluster level (existence of TWG and CLA role)

An analysis of the existing communication channels clearly shows **two parallel pathways** of escalating technical requests upstream to meet capacity gaps from country to global levels, presented in Figure 2. The escalation of technical requests is dependent on whether the NCC is dedicated or double-hatting. The latter have more internal steps to go through before a technical request reaches global levels, which is likely to influence the response time but has the potential for making use of relevant regional expertise.

FIGURE 1

Current information flows for technical NiE matters between GNC and country clusters

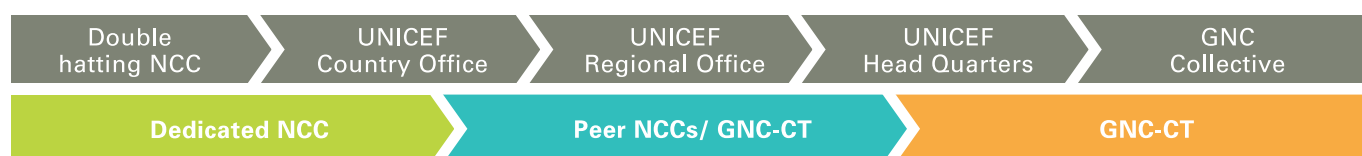


There is a clear two-way nature of technical expertise flows, where field level experience feeds upwards to influence global level actors thinking, and global level initiatives feed downwards to be disseminated for broader field level use. This two-way flow is the basis of Knowledge Management but is not articulated as such in Pillar 4 of the GNC Strategic Plan (see annex 9), which refers to sharing experiences and learning of coordination (not operational) gaps in technical NiE issues.

²³ The vision of the GNC is to safeguard and improve the nutritional status of emergency affected populations by ensuring an appropriate response that is predictable, timely and effective and at scale (2014).

FIGURE 2

Pathways for escalating technical requests to meet capacity gaps at country level



Additional pathways where a cluster partner directly raises NiE issues to the GNC-CT and UNICEF at global level exist but the review focused on the country level pathways.

UNICEF staff double-hatting had strong reservations about their role in relation to bringing up technical NiE issues through the UNICEF system on behalf of the cluster, and acknowledged not always being able to differentiate the UNICEF mandate from the UNICEF technical role as CLA. Dedicated NCCs conversely made increasing use of their direct line of communication with the GNC-CT and their NCC peers to be able to explore how best to escalate technical NiE issues. This dual system is a reality and symptomatic of the double-hatting NCC function. Table 5 provides examples from the country consultations.

An informal and ad-hoc system is currently in place based on alliances and networking, and not necessarily on requesting support from experts in a specific area of expertise, with the exception of assessment support requested from ACF Canada and the Centre for Disease Control (CDC), and from Help Age for areas related to the elderly. This means that the GNC collective is not aware of the range of technical NiE gaps that exist at field level, although different members have varying levels of insight because of their field level involvement.

On a second and more profound level beyond the scope of this review, there is no system for assessing to what extent technical NIE support requests are being met satisfactorily to a sufficient operational standard. There is no system to capture how effective the existing systems are to improve the technical quality of the response.

TABLE 5

Examples of how technical NIE expertise gaps are escalated at country level

Country case study 1	Country case study 2	Country case study 3	Additional case study
<p>The NCC “double hatting” will request NiE technical expertise in UNICEF regional office and will send an email and will communicate with the NIE focal person.</p> <p>This person can come for field visit if necessary.</p> <p>Likely that the issue would not be escalated to the GNC because NCC felt the issue is linked to a specific and localised “context” and support may not be adequate.</p>	<p>The fully dedicated NCC will request support from the helpdesk in case of major technical issues or will rely on her own network. For issues of lower importance, the NCC will rely on her nutrition expertise and close collaboration with the IMO.</p> <p>The NCC will not request any support from UNICEF – not perceived as technical support provider – just a coordination body.</p>	<p>The fully dedicated NCC will request support and guidance from the helpdesk and the GNC-CT. The NCC felt he couldn’t escalate any technical issues to UNICEF in country or regional office. He is perceived as an additional technical expert in country.</p> <p>Was not told during the induction process if the NCC could defer to the UNICEF country office or regional office for support and by default goes to the GNC-CT.</p>	<p>The fully dedicated NCC hears of the technical issue discussed in the TWG, which is required to present recommendations in plenary. If the issue remains unsolved, it goes to the SAG and is only escalated to the GNC-CT if no satisfactory solution has been found. The only technical issue to be escalated to date has been related to discharge criteria (MUAC versus WFH) and cut offs.</p>

Box 4 lists the existing ways country nutrition clusters are accessing technical NiE expertise, clearly indicating that the use of in-country expertise is the most used method and that escalating requests externally takes a number of forms.

BOX 4

Existing ways country clusters access technical expertise

The online survey showed that the main sources of technical expertise drawn on at country level, listed in order of importance given by respondents:

1. In-country expertise (84%)

2 and 3. National cluster partners (74%) & UNICEF country nutrition specialist (74%)

4. GNC-CT Geneva (68%)

5. Browsing GNC website (61%)

6. UNICEF Regional and Head office (53%)

7. Using technical fora (47%)

Source: online survey results

Note: Participants were allowed to choose several answers; this is why this is not equal to 100%.

Communication channels

Opinions on the best communication channels for raising and addressing technical NiE expertise gaps for operational support are divided among the GNC collective. They appear to be based on the agency's mandate and level of operational field experience. In the absence of any other technical forum the GNC-CT is seen as having a clear function of tracking technical NiE support requests. Less clear is the GNC-CT role in terms of serving as a mere conduit for technical NiE issues or taking on an increasingly responsive role, by advocating for guidance to fill technical NiE capacity gaps, or coordinating the development of interim operational NiE guidance to fill a gap.

KEY FINDINGS:

- The findings indicate that there are three main characteristics particular to country level clusters that are directly linked to their capability of resolving technical NiE issues at country level: lifecycle stage of the cluster; type of technical role being played; and main method for escalating the technical gap.
- Channels for escalating technical expertise requests are informal and likely to differ when there is a dedicated NCC and an NCC that is double-hatting. It is unclear what the channels are when there is no NCC or RRT acting as NCC.
- Any model for raising and delivering technical NiE expertise will need to accommodate the diverse nature of the country level clusters and technical experience.

4.4 How the GNC/country clusters collaborate to meet the technical needs

The review findings indicate consensus on the fact that the GNC collective is not capitalising on the expertise of the members for use by the collective, despite a very collegiate working ethos. The GNC partners offer direct field presence and a degree of neutrality and flexibility, as well as technical expertise, in a way that UNICEF as CLA is perhaps not able to provide. However, GNC members are already overstretched with heavy workloads and have limited capacity for increasing the time they dedicate to fulfil a technical role under the current partnership model.

The GNC-CT has recently mobilised technical experts so that *technical support* can be provided more systematically for assessment through MoUs with ACF and CDC and this has potential for being expanded as a model. The newly established technical surge team in which a consortium of 3 INGOs (Action Against Hunger USA, Save the Children, under the lead of International Medical Corps) provides technical human resources for country level technical support is responding to a technical gap. The sustainability of this scheme will need to be put to the test and is donor dependent.

The level of participation at country level of GNC level actors is context specific, and recent emergency contexts have shown contexts where INGOs have less presence

and a number of local actors are implementing the response. This is especially true of the increasing number of emergencies that require remote operation models because of security issues such as in Syria, Yemen or Somalia.

NCC preferences for getting technical expertise

The online survey results showed strong agreement for the GNC-CT, cluster members and CLA to provide technical NiE support to national cluster coordination platforms (92%).

Views on preferences for a number of mechanisms to raise and address technical NiE issues for which there was a majority agreement/strong agreement in descending order of preference include:

- Including technical NiE issues in the monthly NCC calls (95%).
- Hosting a NiE Community of Practice (95%).
- Organising regular webinars and discussions on NiE (90%).
- Technical field visits alongside cluster performance monitoring visits (94%).
- Online forum for NCCs and IMOs to post technical queries directly to cluster members (80%).
- Signing of formal partnership agreements with technical institutions to outsource technical expertise on pre-agreed technical areas (64%).

Diverging views were found for the following:

- Systematically deploying technical surge in Level 3 emergencies alongside cluster coordination resources (disagree/strongly disagree 31%; agree/strongly agree 47%).
- Mainstreaming all technical requests raised by NCCs and systematically outsourcing the appropriate technical NiE expertise (disagree/strongly disagree 31%; agree/strongly agree 52%).

With regards to who was best placed to mainstreaming technical NiE support requests from NCCs and initiate a Task Force to address specific technical issues, the preference was as follows:

- The GNC-CT (68%).
- UNICEF CLA (32%).

With regards to who was best placed for the provision of capacity development in NiE, the preference was as follows:

- GNC-CT (48%).
- GNC partners (26%).
- UNICEF CLA (21%).

These results indicate the current level of expectation by NCCs on the GNC-CT and UNICEF as CLA to be delivering on these technical issues. The low expectation for UNICEF to be delivering technical NiE trainings is questionable and should be investigated further, given this is a key preparedness activity.

KEY FINDINGS:

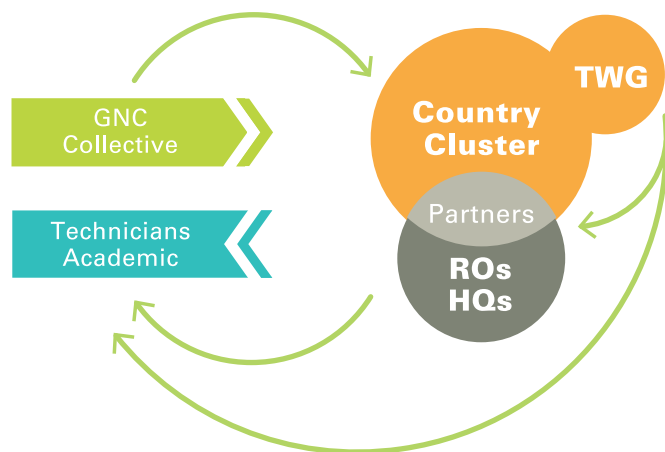
- The current collaboration between the GNC collective and country clusters is based on networking and often bypasses UNICEF's technical support structures. There is no current system to track what technical NiE issues UNICEF, or any other external actor, successfully provides support for nor what issues remain unresolved. The current system misses out the advantages of regional expertise of GNC partners and UNICEF.
- The NiE sector is missing a strategic plan for addressing technical capacity NiE gaps and the measures in place appear to be temporary stopgaps. The provision of technical support is not explicitly linked to a broader technical role strategy that harnesses training, operational research and learning.

4.5 Possible models for escalating technical NiE gaps from country levels

The review sought to identify existing and possible models for escalating technical NiE support gaps from the country level to be able to respond to the request to address the operational grey zone raised by UNICEF at the March 2015 GNC meeting. Box 5 lists the possible options mentioned during interviews and consultation.

As part of the consultation process, Figure 3 below was used to elicit the ideal models of raising and addressing technical NiE support issues from country level to global level expertise from the GNC-CT and GNC-SAG; NCCs, IMOs and RRTs during the GNC annual meeting in October 2015. It was highlighted that the TWGs at country level are made of NiE partners, including UNICEF, and that technical NiE support expertise can be sought via the partners who can escalate up through their agencies, or can be sought by the NCCs.

FIGURE 3
Possible pathways to access technical expertise at country TWG level



Key: RO Regional Office. HQ Head Quarters of any agency that has these strictures.

BOX 5

Possible ways technical NiE support expertise could be provided to country level clusters:

- i) Pre-identification of technical experts (roster) to respond to technical queries or conduct field visits (used in the WASH cluster model and requires CLA funds).
- ii) Increased regional/global collaboration with UNICEF at country level, for example joining GNC global level meetings.
- iii) Providing specific technical surge capacity through a roster of global experts as an interim measure within a broader strategy (new scheme about to start).
- iv) Peer to peer learning.
- v) NCC inductions on how to access technical expertise.

GNC-CT as conduit for raising and accessing technical NiE support expertise:

- vi) *GNC-CT linking national TWGs to global technical experts (academics, and technical fora).*
- vii) *GNC-CT having global MoUs with GNC partners for specific areas of expertise and being linked directly to country clusters therefore having a more predictable mechanism in place.*
- viii) *GNC-CT linking countries with specifically formed global Task Forces convened to address a technical gap (not used yet, but based on the MAM decision tool model where GNC actors worked together to provide interim guidance to field level actors).*
- ix) *GNC-CT managing a Technical Helpdesk with additional resources to respond to technical support requests.*
- x) *GNC-CT coordinating GNC led technical field visits.*

Four possible models drawn up by the groups consulted are presented in annex 8. The four groups consulted opted for the most direct communication model from country to global level via the GNC-CT. This indicates a level of expectation at country level for the GNC-CT to serve as a conduit for technical issues that fails to grasp the core functions and workload of the GNC-CT.

Figure 4 below summarises possible models for the GNC collective technical role which range from Model 1 no role, to increasing levels of responsibility for having a technical function to respond to country clusters.

Model 1 leaves no room for technical support through the GNC and leaves a vacuum for how these issues can be raised and addressed given UNICEF's current technical NiE capacity. Models 2 to 5 acknowledge that the GNC-CT is in a privileged position to serve as a conduit for tracking country level technical NiE expertise gaps and to serve as a liaison between country level practitioners and technical experts, but limit the GNC-CT role so as not to detract from its core functions. Model 5 is the only one to attempt to address the *grey zone* of how to provide interim operational guidance with the right level of legitimacy so that it can be taken up by country level practitioners. These models need to be explored in more detail through a strengths, weaknesses, opportunities and threats (SWOT) analysis.

All key informants were clear that the GNC-CT had no legitimacy to be endorsing guidance on their own, but they were less clear as to how the operational technical gap should be addressed. Many key informants look to the four UN agencies involved in nutrition to be more proactive in filling the current operational guidance gaps. There was agreement on WHO's role in upholding the development of normative guidance based on evidence, but an equal level of agreement that this left a number of operational technical issues unsolved.

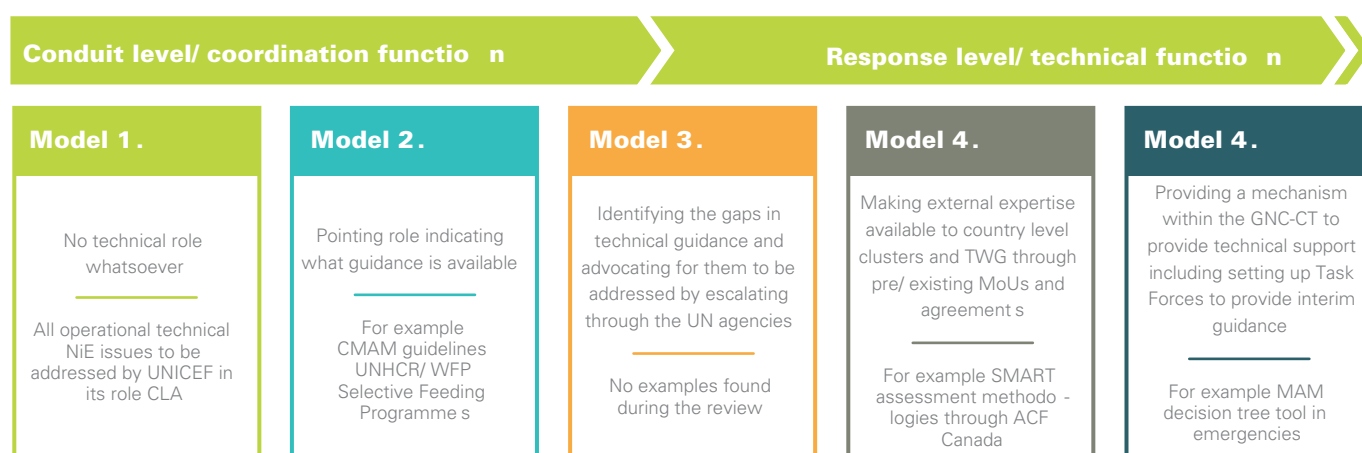
KEY FINDINGS:

- A number of models are possible for the GNC collective to engage with country clusters on technical NiE support expertise issues. The models span different levels of engagement and the choice of most appropriate model or models is likely to be a strategic decision rather than a technical one as it has implications for the way the GNC collective interacts on technical issues.

FIGURE 4

Five distinct models for the GNC collective technical role

GNC collective Technical Role increasing level of engagement in technical issues:



5.

CONCLUSIONS & RECOMMENDATIONS

The findings of this review have shown that the current **technical role** of the GNC collective is interpreted in very different ways, despite a history of skirting around the topic. There is no clear definition for *technical role*. *Technical NiE guidance* and *technical NiE training* are more easily understood by those consulted for this review, than the term *technical NiE support* which was open to much wider interpretation and perceived as a generic term for responding to ongoing context specific field level requests for technical clarity in the absence of normative guidance, as well as help in making existing guidance operational in the emergency context. This leaves *technical support* without clear set boundaries making it subject to individual interpretation and in the face of responding to emergency nutrition needs cannot wait for the formal normative processes to be put in place.

KEY FINDINGS:

- *Technical guidance* when it is available is accessed in many ways with a number of possible repositories, the GNC website is not necessarily the first or only “go to” for technical guidance.
- *Technical training* on NiE matters is perceived to be a GNC-CT function and linked to global funding opportunities as a legacy from the GNC capacity build-

ing strategy, and not necessarily country level-led training. Very few respondents saw the rolling out of technical training to be the function of UNICEF as CLA.

- *Technical support* for field level operational issues around areas where there is no guidance is being accessed in a number of different ways, often bypassing UNICEF technical roles. Assessment expertise is most successfully linked to external expertise, which is fundamental to prioritising the NiE responses in every emergency. The existing channels for accessing technical support appear to be structured around a system based on *who you know* and linked to established working relations, rather than mandate or technical expertise.

The NiE sector is missing an overarching technical platform that can provide strategic direction on how to prioritise and address technical capacity gaps at country level and this means that the GNC-CT is at risk of filling that gap in the absence of any other systematic system. The review did not find enough evidence of UNICEF’s progress in providing the necessary human resource capacity and expertise to fulfil its CLA role at country level and instead came across a range of alternatives taken by GNC partners to step up and fill both a human resource gap and a technical NiE capacity gap. This has led to an ad-hoc system based on networking, and different models of linking in country, regional and global technical expertise. The system lacks the predictability desired by NCCs

and IMO working at country level, but has the advantage of being able to become self-regulating and grow and shrink in line with real technical NiE capacity gaps on the ground, which require technical training and technical support as well as additional technical guidance.

The review findings also reveal a general agreement that the GNC-CT requires technical acumen to be able to support responses when a cluster is activated at country level, especially at needs assessment and response prioritisation stages. In this sense their coordination and information management function requires technical NiE know-how. However, there is agreement that global level actors cannot be expected to have the necessary technical NiE expertise to be able to operate in all contexts. There is also agreement that the GNC collective and technical partners and observers have technical expertise on very specific NiE issues such as elderly, micronutrient deficiency diseases, IYCF-E and so on, which means the GNC collective should be tapping into these more systematically.

The GNC-CT is best placed to be a conduit for seeking technical NiE support expertise but not for providing it, or it risks detracting from the core GNC-CT functions. The GNC collective needs to position itself on their technical role either by finding a system to address technical NiE issues or by passing them on. If it chooses the former, it must be prepared to invest considerable time and resources to achieving this successfully.

This review also raises a set of fundamental questions:

- **Why is there no clear guidance from IASC on the Technical Role of the global clusters?**
- **Why are current systems to provide technical support to countries so ad-hoc?**
- **Would coordination and information management be possible without a considerable level of NiE technical expertise?**
- **What role does the GNC collective want to have to address the technical gaps at country level given there is no other global technical NiE platform available at present?**

In line with the TOR, recommendations are presented next.

5.1 General recommendations for immediate action by the task force on the technical role of the GNC collective to be convened by the GNC-CT:

1.

Agree on a working definition of *technical role* to promote the work of the GNC at country level for an improved and effective response.

Consider starting with the three classifications used in the Governance Review of *technical guidance, technical training and technical support* and better defining what falls under each. Define technical support with a clear set of boundaries based on field realities of the operational gaps exposed in this report. This could be performed in joint collaboration with other global clusters at a time when standards and quality are being brought back under the cluster's remit.

2.

Collectively acknowledge and address the existence of an operational technical grey zone for NiE responses that require interim operational guidance in emergency contexts and cannot wait for the development of normative guidance.

In the absence of a technical platform for prioritising and addressing operational technical NiE capacity gaps, agree on a two-pronged strategy:

- i) Immediately: Clarify how the GNC collective and the nutrition community in general can generate interim operational guidance to address technical gaps with sufficient level of legitimacy to guide emergency life-saving responses. Agree on an acceptable level of endorsement for interim operational guidance acceptable to the GNC collective. Harness the interest expressed and the experience shown by some GNC partners to be seen as technical leads in certain NiE areas.
- ii) Mid-term: Advocate for the creation of such a platform led by the UN agencies involved in NiE, and in close collaboration with the SUN movement / development world.

3.

Develop a systematic classification system for articulating technical operational NiE issues that can be used by all NiE practitioners which allows for an evidence-based compilation of technical issues and gaps.

Put in place a systematic mechanism for classifying technical NiE issues. Consider starting with the 30 categories used in the NIE competency framework, which are largely based on the HTP modules but include a more generic skill set and the broader range of nutrition sensitive issues. Elaborate a comprehensive list and use the classification system to:

- i) Immediately: Track, prioritise and find interim solutions for operational NiE gaps through the use of the GNC collective and technical experts.
- ii) Mid-term: Advocate for support from donors and technical forums that enhance knowledge management to influence the NiE research and normative guidance agenda to address operational technical gaps.

4.

Identify a lead with the specific function of tracking technical operational gaps according to the agreed classification system for NIW technical issues.

Consider the GNC-CT's current unique position with access to the world's nutrition emergencies to start being the lead for the tracking function of technical NiE gaps in a way that does not detract from the GNC-CT's core functions. Ensure additional resources are allocated to this function and are handed over if appropriate to another body in the future.

- i) Immediately: Consider broadening the scope of responsibilities of the current GNC-CT helpdesk to track operations gaps systematically as an interim measure to set up a system.
- ii) Mid-term: Once the tracking system is established, consider handing over to another body as a more sustainable solution.

5.

Carry out a SWOT analysis of the models for providing technical support presented in this report

Take stock of the many ways in which the GNC-CT has been providing *technical support* (Box 6) and carry out a SWOT analysis of each. Make strategic decisions to select most appropriate, cost effective, and sustainable models that build on the partnerships approach but do not detract from the GNC core functions. Any involvement in technical role issues should not be detrimental to the coordination role of the GNC-CT and therefore will require increased capacity.

5.2 Recommendations for UNICEF as CLA

5.2.1 IMMEDIATE RECOMMENDATIONS:

6.

Take the lead on the systematic global provision and roll out of the NIE training to practitioners, including UNICEF staff.

Include this lead role as a preparedness activity at country office level and scale up in response to emergencies when the cluster system is activated. Identify a costing plan for this activity to be sustainable and build on the training materials developed by the GNC collective. Address the current expectation by NCCs identified in this review that technical NiE training is not a CLA role and that the GNC-CT is best placed to manage this.

7.

Commit to additional financial and human resources to ensure adequate support for technical capacity on the ground that adequately reflects the separation of duties between technical support and the coordination role of dedicated NCCs.

Increase efforts to ensure timely and suitably trained NCCs and IMOs are available for cluster roles at country level. Minimise double-hatting to small-scale emergencies and prohibit double-hatting in L3 emergencies. This is in line with CLA responsibilities and duties over and above UNICEF nutrition-specific mandate duties as re-emphasized in the 2015 Cluster Coordination Guidance

for Country Offices. Failure to address this issue will continue to reinforce the current ad-hoc ways of working and the confusing of coordination with technical support.

8.

Ensure the provision of increased technical CLA expertise at country level to country nutrition clusters and to support NCCs to escalate requests to regional/head office levels when appropriate as the CLA.

Consider a more systematic approach and higher level of engagement when there is a technical NiE capacity gap that is not adequately resolved at country level. Address the current perceptions among NCCs that they cannot go to the UNICEF country office to escalate technical NiE capacity gaps because they are being seen as a NiE technical resource, despite their NCC or IMO function.

9.

Put in place a mechanism with the GNC-CT to account for the quality of the delivery of country cluster level TWGs.

Develop an accountability mechanism with the GNC-CT to ensure nutrition TWGs at country level are performing, that allows the identification of technical support gaps and records progress and learning on technical related issues. Feed this information into the global capacity building debate at the GNC and within UNICEF Head Office.

10.

Include systematic capacity mapping exercises for NiE technical expertise at country cluster level.

Ensure technical training and operational technical support requirements at individual country level are identified as part of preparedness activities and at the onset of a new emergency. Identify the best strategy for addressing technical training and support requirements to ensure cluster membership performance.

5.2.2 MID-TERM RECOMMENDATIONS:

11.

Foster formal strategic relationships with other NiE experts.

UNICEF cannot be expected as CLA to be able to provide technical expertise at country level on all technical issues. UNICEF could reach out more systematically to other UN agencies to maximise the expertise afforded by each of them in line with their mandate and engage in the development of more joint guidance in response to technical NiE gaps.

12.

Consider advocating for the convening of a technical conference on a regular basis.

In the absence of another forum and with UNICEF's global presence, technical conferences to share and discuss technical updates are another preparedness activity to allow NiE practitioners to keep abreast of technical NiE issues. As CLA, UNICEF could lead on this in recognition of its NiE role and required dedicated funds and staff, and ensure donor funding is made available for this function with advocacy support from the GNC collective.

5.3 Recommendations for the GNC-CT and GNC SAG

13.

Convene and facilitate the setup of Task Forces when a technical NIE gap has been clearly articulated.

In line with the GNC SOPs, convene time-bound global Task Forces to address specific technical gaps highlighted by GNC members. This mechanism has not yet been trialled and participation should be on a voluntary basis. The global GNC collective expertise can be tapped into through this mechanism and the identification of the need for additional external expertise can be quickly identified. Encourage GNC partners to lead on TWGs, including the elaboration of TWG TORs, and encourage UN agency participation.

14.**Develop a system for raising technical role issues to the right individual within the CLA structure.**

Ensure that the GNC-CT systematically raise technical training, technical guidance and technical support issues arising at country cluster and at GNC global level through the partners to the CLA for appropriate action.

15.**Engage with UNICEF as the CLA in putting in place a mechanism to account for the quality of the delivery of country nutrition cluster level TWGs.**

Develop a joint accountability mechanism within UNICEF as the GNC to ensure nutrition TWGs at country level are performing, that allows the identification of technical support gaps and records progress and learning on technical related issues.

16.**Update the GNC Standard Operating Procedures in line with any decisions made on the GNC technical role.**

5.4 Recommendations for the GNC global level partners

5.4.1 IMMEDIATELY:**17.****Contribute to discussions on how to have an endorsement process for interim operational NiE guidance.**

Ensure adequate participation on ways of making interim operational guidance to support specific country NiE responses available in a way that is deemed legitimate until normative guidance can be provided. Use country level as well as global level presence to achieve this.

18.**Make technical NiE experts available to the GNC collective under predefined agreements.**

List and include the technical NiE experts within the GNC and establish predefined agreements for technical expertise, making your areas of interest and expertise clear. Differentiate global level expertise at head office levels from country level operational expertise. Identify regional level expertise that supports NiE programming and is closer to country level responses.

19.**Continue to play the role of whistle-blower on technical NiE gaps at ground level.**

The GNC partners' presence at field level and participation at country level cluster level is a key advantage to escalate technical gaps. Donors' and academics' contact with the field are also opportunities to identify technical gaps. The collective is therefore well placed to discuss priority NiE response capacity gaps and agree on ways of addressing them globally using agency mandate and technical expertise as a backbone.

5.4.2 MID-TERM:**20.****Be forward thinking about the next priority technical areas ready for country level roll out.**

Actively support the increased use of broader NiE technical areas beyond CMAM and IYCF-E and become a stronger collective voice for unaddressed technical NiE issues. Agree on priority technical NiE areas that country level actors should become familiar with and support the development of guidance so that they may be included in their programming. For example: increased liaison with other sectors on nutrition-sensitive interventions, different service delivery modalities with use of cash and vouchers, and the double burden of malnutrition and chronic diseases. These will need to be tackled in turn and require a coordinated prioritisation effort to influence donor-funding strategies.

ANNEXES

Annex 1. Terms of reference consultancy for clarifying the nutrition cluster position on providing technical support to country clusters

Annex 2. Secondary data review documents

Annex 3. Historical overview of GNC collective technical role

Annex 4. List of key informants interviewed

Annex 5. Review tools - online survey questionnaire and key informant interview guides

Annex 6. Overview NCC and IMO online survey results

Annex 7. List of technical issues arising at country cluster level – (results from online survey questions 20, 21, 23, 25 and 26 and key informant interviews)

Annex 8. Four communication models for raising and responding to technical issues from country to global level

Annex 9. GNC structure and relevant technical role highlights

Annex 10. GNC standard operating procedures and roles of GNC collective

Annex 11. Additional recommendations for the GNC task force on technical role suggested by the reviewers of this report

ANNEX 1.

Terms of reference - clarifying the nutrition cluster position on providing technical support to country clusters

BACKGROUND

As part of the Humanitarian Reform process, the Cluster Approach was initiated in 2005 as one way to improve the effectiveness of humanitarian response through greater predictability, accountability, responsibility and partnership. In order to efficiently carry out these accountabilities, UNICEF as a Cluster Lead Agency (CLA) created a Global Nutrition Cluster-Coordination Team (GNC-CT) in 2006 responsible for the day to day coordination around cluster coordination and information. Through the collective global level partnership, significant achievements including the development of technical guidance and tools such as the Harmonized Training Package (HTP), Nutrition in Emergencies (NiE) Toolkit, Operational Guidance on Infant and Young Child Feeding in Emergencies (IYCF-E), a review of the Management of Acute Malnutrition in Infants (MAMI), development of a Supply and Commodity Toolkit and support to the update of the SMART survey tool and the Initial Rapid Assessment (IRA) toolkit²⁴ etc.

From 2006 to 2013, the GNC had two Working Groups which were a subset of GNC Core Partners, who collaborated in the definition of specific standards for the GNC that are relevant at global and country level. The two Working Groups were the Assessment Working Group (AWG) and the Capacity Development Working Group (CDWG). The working groups supported a wide range of strategic discussions around assessment, tool developments, assessment related projects and rollout of the GNC tools. These two WGs have led the WG members in support of the GNC-CT in executing the workplan activities as outlined in the agreed upon annual workplan. They have also supported the GNC-CT in planning facilitation of Annual and Face to Face meetings and have promoted coordination between WG members by sharing relevant information related to the specific WG or on the GNC activities broadly. From 2006 to 2009, the overall management of

the GNC workplan under the four strategic pillars were organized around the two WGs. These two WGs were also responsible for vetting and approving new projects presented by the GNC partner to the GNC-CT for funding.

In 2013, in order to enhance performance of the GNC and align its focus with the Transformative Agenda (TA) and overall Humanitarian Project Cycle²⁵ and other TA related guidance, the GNC conducted a governance review. Recommendations from this review included the development of a three-year Strategic Plan with a revised focus to reflect the functional areas set out in the Transformative Agenda. The GNC Strategic Plan 2014-2015 was developed with a renewed focus on support to country clusters to ensure strong leadership, capacity and skills for coordination and mutual accountabilities. The GNC partners then proposed the establishment of a Strategic Advisory Group (SAG) and agreed to revisit the structure, governance and operational modalities of the GNC, and since March 2013 the SAG has been operational but supporting strategic discussion within the GNC. In addition to this structure, the GNC has a Rapid Response Team (RRT) which is a partnership between the GNC and four GNC partners that host the RRT members. The purpose of creating the RRT was to increase the capacity of the GNC to support Cluster coordination and information management functions through rapidly deployable NCCs and Information Management Officers' (IMO) technical capacity in humanitarian situations. This enables timely and coordinated response which then ensures improved emergency nutrition interventions, while the GNC has also recently established the need for technical surge capacity which is included in its 2014-2015 WP.

CURRENT GNC PARTNERS INVOLVEMENT IN TECHNICAL WORK

As is reflected by the GNC 2014-2016 strategic priorities, the focus is on ensuring stronger coordination response, which is indeed the role of the Cluster. However, recently questions have been asked around the role of the collective GNC in supporting technical efforts of the partners and/or the NCCS in their efforts to harmonize programmatic approaches. In particular this question has been raised in the most recent L3 responses in the Philippines, Syria and Ukraine, where NCCs are faced with technical issues. There may be a structure to address this at country level through Technical Working Groups (TWGs) but an equivalent structure to support the country level discussions and agreement on operational technical issues does not exist at the global level. This is mainly because, besides the development of tools and technical trainings on NiE based on the HTP conducted

24. More details on the GNC can be found on <http://www.nutritioncluster.net>

25. The **Humanitarian Project Cycle** was defined to ensure greater coordination, information management and preparedness within humanitarian response. It articulates how and when humanitarian programming should address the areas of coordination assessment and needs analysis, strategic planning, resource mobilisation (flash appeal etc), implementation and monitoring, operational peer review and evaluation.

with ECHO funding in 8 countries by the GNC in 2010-2011, it is understood that global cluster partners have a responsibility in ensuring their staff have the technical capacity to implement NiE programmes at country level. Therefore, from the inception of the GNC to date, there has not been a TWG that can respond to technical questions that the collective cluster partnership may have. However, the experience from the GNC-CT has shown that technical requests do exist and often are directed at the GNC-CT or to other technical forums such as the infant feeding in emergencies (IFE) Core Group or the CLA. However to date there has not been a system put in place by the GNC and its partners to address those issues.

The need to define the role of the GNC in organizing itself better to ensure country clusters have the requisite operational support became more apparent during the Philippines and the Syria crises, where huge technical gaps for programmatic scale up was attributed to a technical capacity gap within partners, especially local NGOs, to effectively scale up the response. Although the GNC partners have taken a step to address this gap through the technical surge support being established by a consortium of Cluster partners under the leadership of IMC, collectively, the global partnership under the GNC umbrella has not effectively capitalized on the technical capacity of its global partners in support of the technical needs of the country clusters, except for some support being received from CDC and ACF-Canada for SMART surveys and sometime the IFE Core Group. Secondly, given the global level vacuum in technical forums containing UN and NGOs and development and humanitarian approaches within NiE, effective utilisation of global technical capacity for the good of programmatic scale up becomes even more important.

During the March 2015 GNC partners Face to Face meeting, after a presentation for the Ukraine and Syrian Clusters where the issues of technical capacity and the lack of harmonized support to those countries around technical issues were raised, the GNC partners agreed to form a Task Force that will discuss the role of the GNC on technical issues and recommend ways in which the GNC partners need to organise themselves to address those gaps. However to inform the global level discussion, it is important to understand how Clusters are organised at country level with some having TWGs which support the Cluster partners.

At country level, the Nutrition Cluster would usually have a SAG that is responsible for strategic decision making, including the development of the Cluster strategic response plan and guiding the prioritization of the Common Humanitarian Fund (CHF) amongst other things. However, in addition to the SAG, most Nutrition Clus-

ters also have TWGs on CMAM/IMAM, IYCF, Assessments, Information Management and in a few countries Capacity Development or Advocacy. Although there are slight differences in the Terms of References (TOR) of the various country TWGs, there is similarity in the tasks between countries such as harmonization of guidance, provision of technical support to cluster partners on specific technical areas, advising the SAG on issues related to the implementation, compliance on the agreed standards and guidelines, follow up of technical and policy issues raised within the cluster forum, identification and discussion on capacity gaps, developing strategies for improving the monitoring, evaluation and delivery of services, discussion on implementation challenges, discussion around guidance for collaboration within the cluster and other clusters, etc.

Therefore, in order for the global level discussion on the role of the GNC on technical support to be relevant and in support of country clusters, it will be important to first review the role of the NCCs, IMO and TWGs in supporting the collective cluster partners on the respective technical issues. This will be done through the review of the existing TWGs of the various country clusters including the TORs and the deliverables of a sample of countries, in order to identify what issues they are able to respond to at country level and which technical issues they would have required global support on.

Such a review will then form the basis for the GNC to define its role in technical issues, in support of country clusters and will also be able to identify which global forums such as the CMAM Forum, the IFE Core group etc. can be tapped into for support and if not required, what it is that the partners can handle themselves. This includes issues that can be handled by the technical surge or through a TF, including possible linkages with technical institutions the GNC can tap into in areas which the global partners cannot resolve.

Specific objectives

- Identify what the technical needs are of the Country Nutrition Clusters and the GNC;
- Review the level and the scope of engagement of the GNC and country nutrition clusters in Nutrition in Emergencies programming at global and country level;
- Define how the GNC/country clusters collaborate to meet the needs.

SPECIFIC ACTIVITIES

- Through a survey monkey administered to all Cluster Countries, identify what the technical needs are of the Country Nutrition Clusters and the GNC through questions on how the technical needs are currently met and what gaps exist. Identify what specific technical areas/issues are arising and not easily met, how people are addressing them (sources, bottlenecks, communication channels), and how they want to have these addressed (format, how to access etc.);
- With the GNC-CT and GNC SAG, identify 2-3 Country Nutrition Clusters to discuss in more detail the roles/responsibilities of the cluster in NiE programming with the Cluster Coordination teams (NCCs/IMOs), SAG and TWGs in supporting the collective cluster partners on the respective technical issues (one-two country visits and one-two desk reviews/remote communication);
- Compile the key findings from the country level consultation(s) including:
 - A mapping of technical resources available
 - How to improve knowledge management
 - What technical gaps need to be addressed
 - How to improve communication/standard operating procedures (SOPs)
 - Determine what fail safe mechanisms the GNC can put in place to flag if these needs are not met
 - Define the communication channels and how the requests to meet capacity gaps are escalated, what works and what doesn't work (in particular in terms of accessing the CLA (UNICEF) technical expertise
 - How technical requests are taken upwards in the different agencies

Present back to the GNC-CT and GNC SAG in order to further discuss the implication of the country level findings on roles/responsibilities of the GNC-CT and GNC as a whole in NiE programming, modalities of how the GNC and country clusters should engage in NiE programming at global and country level, guidance development, etc.;

- Consolidate the country level findings with global level discussions and present this to the GNC SAG,

GNC-CT and the collective at the GNC Annual Meeting (Oct 2015);

- Organise and facilitate a session and working group discussion around the role of the GNC and the role of country clusters in providing technical guidance in NiE programming during the 2015 GNC Annual meeting;
- Following the review, propose the role and the modalities of how the GNC and the country cluster should engage in NiE programming at country level and global level;
- Finalise the document based on the feedback from the GNC SAG and GNC-CT for final endorsement at the 2016 Face-to-Face GNC Meeting.

EXPECTED OUTPUTS

Interim outputs:

1. Documentation of in person and remote consultations with 1) Country Cluster Coordination teams, 2) SAG, 3) Country TWGs and 4) partners.
2. Compiled key findings from all consultations, which will be shared for feedback with GNC-CT and SAG.
3. Presentation of key findings for use in the GNC Face to Face meeting in October 2015.
4. Documentation of working group discussion outcomes including justification for decisions made.

FINAL OUTPUT:

A final document outlining the level and scope of engagement of the GNC and country nutrition clusters in Nutrition in Emergencies programming at global and country level.

TIMEFRAME FOR DELIVERABLES

Timeframe	Sep	Oct	Nov/Dec
Design and deliver survey monkey to identify country clusters to engage with and define the roles/responsibilities of the Cluster in NiE	x		
1-2 in country visits to country clusters	x		
Present initial findings to GNC-CT and SAG and incorporate feedback	x	x	
Present to GNC Face to Face Meeting in October 2015 and organise a working group session to obtain collective feedback from partners		x	
Produce final document to GNC-CT and SAG and incorporate feedback before finalisation			x

EDUCATION

- Advanced university degree in Health, Nutrition, Social Sciences or other related field. A BSc/ MSc or equivalent is required.

WORK EXPERIENCE

- 5 years of progressive responsibility with NGOs or UN agencies in programme formulation, planning, management, and evaluation, some of which should be in emergency programme management and operations.
- A good understanding of humanitarian reform, TA and the Cluster Approach.
- Experience in coordination and good understanding and experience of nutrition in emergencies and the humanitarian reform process.
- Excellent communication skills, organizational skills and the ability to work in a team and with cluster partners.
- Excellent analytical, report writing and consolidation skills.
- Previous experience in cluster/sector coordination and development of guidance or handbook is an asset.

COMPETENCIES

- Versatility, judgment, maturity and the ability to work independently as well as on a team.
- Experience in successfully gathering and compiling scientifically sound information from diverse sources.
- Current knowledge of emergency nutrition guidelines, policies, IASC guidelines, as well as procedures in international humanitarian work.
- Proven ability to conceptualize, innovate, plan and execute ideas.
- Leadership and organizational abilities.
- Good analytical, negotiating, communication and advocacy skills.
- Computer and writing skills including internet navigation and various office applications.
- Demonstrated ability to work in a multi-cultural environment and good track record in working with various partners and within an international organization.
- Fluency in English.

GENERAL CONDITIONS

- Period of performance: 15 September 2015 – 15 December 2015.
- Length of consultancy: 44 days within the 3 month time period.

ANNEX 2.

Secondary data review documents

1. _____
GNC (January 2013), *Nutrition Cluster Handbook* First edition.
2. _____
Gostelow, L. (October 2013) *Global Nutrition Cluster Governance Review Report*.
3. _____
GNC (July 2014) *Global Nutrition Cluster Strategic Plan 2014-2016*, Final version.
4. _____
GNC (March 2014) *Global Nutrition Cluster Standard Operating Procedures*, Version 3.
5. _____
GNC and Country Level Nutrition Clusters (September 2014) *Lessons learned in country Nutrition Clusters* for Ethiopia, Philippines, Somalia, South Sudan and Yemen.
6. _____
GNC (2013-2015) *Cluster Performance Monitoring Reports* for Afghanistan, Chad, Ethiopia, Philippines, Somalia and South Sudan.
7. _____
GNC (2013-2015) *Rapid Response Team End of mission reports* for CAR, Chad, Malawi South Sudan, Southern Turkey/Syria, Ukraine and Yemen.
8. _____
GNC (March 2011) *Identity Ad Hoc Group Terms of Reference*.
9. _____
GNC SAG (2014-2015) Meeting minutes.
10. _____
GNC (2011-2015) *Face-to-Face Meeting reports*.
11. _____
GNC (July 2012) *Technical Competency Framework for Nutrition in Emergencies Practitioners*, DRAFT Version 1.0.
12. _____
GNC (2013) Advocacy letters to SUN, FAO, UNICEF, WFP and SCN for a mechanism for harmonization policy and guidance for nutrition in emergencies
13. _____
IASC (November 2006) *Guidance Note on using the cluster approach to strengthen humanitarian response*.
14. _____
IASC (July 2015) *Emergency Response Preparedness for field-testing*.
15. _____
IASC (July 2015) Reference Module for Cluster Coordination at Country Level.
16. _____
IASC (July 2015) Reference Module for the implementation of the Humanitarian Programme Cycle, Version 2.0.
17. _____
Steets, J. et al. (2010) *IASC Cluster Approach Evaluation, 2nd Phase*
18. _____
UNICEF (2015) *Cluster Coordination Guidance for Country Offices*.

19.

UNICEF *Terms of Reference* (including NCC, IM, Sub-national Cluster Coordinator, TWG, GNC Global Coordinator, IYCF-E Surge Advisor, Nutrition Surveillance Advisor, CMAM Coordinator).

20.

UNICEF (2014) *Draft UNICEF Cluster Coordination Competency Development Strategy*, Avenir Analytics, Cyprus.

ANNEX 3.

Historical overview of GNC collective technical role

Between 2006 and 2013, the GNC had two global level Working Groups:

- i) the Assessment Working Group, and
- ii) the Capacity Building Working Group

GNC core partners worked together on steering GNC technical work at both global and country level in line with the workplan and operational priorities. This included a number of GNC member led initiatives which began with the creation of specific nutrition in emergencies tools and progressively led towards more specific country level support tools. In 2013 the GNC Governance

Review recommended the development of a three-year Strategic Plan with a revised focus away from a technical nature, to better reflect the functional areas of coordination and preparedness set out in the Transformative Agenda. The GNC Strategic Plan 2014-2015 was developed with a renewed focus on support to country clusters to ensure strong leadership, capacity and skills for coordination and mutual accountabilities and has shaped the GNC workplan development and implementation.

While there has been a clear watershed since the end of 2013, in terms of the GNC collective's technical role, a historical look of GNC products with a NiE technical flavour in terms of technical guidance, technical training and technical support, highlights some fundamentally important issues.

Table A below summarises the specific contributions of the GNC collective that were identified by the authors during this review since 2006. It is incomplete as there was not enough time to seek to complete the table as a concrete output. However, the table highlights the shift away from technical products and remains vague in terms of what technical support actually consists of.

TABLE A.

Indicative historical overview of GNC collective²⁶ technical NiE products

GNC Technical NiE products		
2006-2009	2010-2013	2014-2015/16
Technical guidance:	<i>Technical Guidance</i>	<i>Technical Guidance</i>
Nutrition in Emergencies (NiE) Toolkit;	MAM decision Tree/tool	Humanitarian Response Plan tips
Operational Guidance on Infant and Young Child Feeding in Emergencies (IYCF-E);	Nutrition Information Framework	Contingency planning toolkit
A review of the Management of Acute Malnutrition in Infants (MAMI);	Indicator registry for the GNC	Development of checklist for IMOs
Supply and Commodity Toolkit;	Nutrition Cluster Handbook	Inter-cluster framework with focus on nutrition sensitive interventions in other sectors
Support to the update of the SMART survey tool;		Advocacy Framework
Initial Rapid Assessment (IRA) toolkit ²⁷ ;		Cluster Transition review
		Framework for Accountability to Affected Population (AAP)

26. Global Nutrition Cluster (GNC) Strategic Plan 2014-2016

27. More details on the GNC can be found on <http://www.nutritioncluster.net>

<i>Technical Training:</i>	<i>Technical Training:</i>	<i>Technical Training?</i>
The Harmonized Training Package (HTP)	Revised Harmonized Training Package (HTP)	Updating of Training Package for country cluster partners on the cluster approach
NiE training course	NiE Training roll out in 8 priority countries	Updating of Training Package for NCCs
Development of Training Package for NCCs	PowerPoint presentation based on HTP for GNC partner use on GNC website	IM Toolkit - 29
	Training by Save UK on IYCF-E	Development of training package for IMOs
	Updating the Training package for country cluster partners on the cluster approach and training of cluster partners in 8 countries	
	Updating of the Training Package for NCCs and training of NCCs in 3 regions	
<i>Technical Support:</i>	<i>Technical Support:</i>	<i>Technical Support:</i>
No evidence of technical response on issues arising from country cluster.	Ad-hoc technical response to technical issues through GNC-CT	Ad-hoc technical response to technical issues through GNC-CT and from Help Desk
The two WGs i.e. Assessment and Capacity Building were not designed to respond to field level technical queries and so they did not assume this role	Ad-hoc response from the IFE Core group on IYCF-E issues and review of IYCF-E joint statements	Support for documentation of learning through mention of cluster coordinators to write up case studies in 6 countries
		Ad hoc response from the IFE Core group on IYCF-E issues and review of IYCF-E joint statements

At the end of 2013 GNC products became coordination and information management focused in line with the Transformative Agenda and IASC cluster core functions and Governance Review recommendations.

More non-technical NiE tools have been developed by the GNC to support the core cluster functions including: Cluster approach training packages; IMO Toolkit development 2015; GNC Advocacy Strategy development 2015; and Knowledge management project (country case studies) 2015. The GNC-CT has in this timeline also focused on the creation of specific management

tools such as the Country Cluster Performance Monitoring, the Capacity Mapping, Cluster Transition checklist, and Accountability to Affected Populations Framework, which are specifically developed to monitor cluster performance.

Overview of technical updates and topics on agenda at global nutrition cluster meetings 2011-2015

MARCH 2011

- Technical Discussion: Infant Feeding in Emergencies (IFE)
- Technical Discussion: CMAM
- Technical Discussion: Prevention and Treatment of Moderate Acute Malnutrition in Emergency Contexts
- Technical Discussion: Nutrition Supplies/ Commodities
- Coverage Monitoring Surveys (SQUEAC)

JANUARY 2013

- Technical presentation: pregnant women and malnutrition - diagnostic and indicators: preliminary results from MSF Switzerland
- Technical presentation: MUAC vis-à-vis WFH
- Technical presentation: BSFPs – sharing meeting results, review the draft of the BSFP guidance and tools and decide next steps forward
- MAM Task Force update
- Review of AWG activities / operational modalities / issues
- Review of CDWG activities / operational modalities / issues
- IYCF-E

JULY 2013

- Report back of Assessment Working Group progress made toward information needs and analysis framework and indicators
- Report back from the Capacity Development Working Group
- Emergency Preparedness and Response Planning: Pakistan case study and a technical update from Merlin
- Capacity building in emergencies case studies 1. Capacity building in emergencies including capacity mapping - Afghanistan case study 2. A systems approach for emergency preparedness and contingency planning with IYCF E – Kenya case study
- Promoting inter-cluster programme synergies Inter cluster linkages in Somalia
- Update on application of Competency Framework for NiE
- Technical Update: Addressing the needs of older populations in emergencies
- Technical Update: Gender-responsive nutrition in emergencies

SEPTEMBER 2014

- Nutrition Information in Emergencies with focus on adapted Rapid SMART surveys– implication for the Nutrition Cluster
- Nutrition Information in Nutrition indicators in IPC – implication for the Nutrition Cluster
- Update on Ebola and response
- Technical side meeting on expanded criteria for admission in CMAM programme

MARCH 2015

INTERAGENCY ACTIVITIES

- Assuring nutrition product quality, by Alison Fleet, UNICEF Supply Division, Copenhagen
- Harmonizing composition of lipid-based products; by Saskia de Pee, WFP Nutrition Division, Rome
- Technical aspects needed for nutrition in the field. Does the GNC have a role in engaging in NiE technical capacity issues? What is the role?

OCTOBER 2015

• **Market Place. Background documents: Posters from various agencies showcasing experience in programmatic NiE and coordination work**

1. Updated MAM Decision Tool (WFP/UNICEF)
 2. CMAM Report (previously called MRP) (Save the Children)
 3. Coverage survey- CMN (ACF)
 4. IYCF technical updates/ new tools on IYCF (Save the Children and UNICEF)
 5. Link NCA (ACF)
 6. Somalia Nutrition Cluster Info graphics and Rationalisation Maps (Somalia Cluster)
 7. Emergency Nutrition Coordination, Monitoring, Assessment & Intervention in Ethiopia (Ethiopia Cluster)
 8. Regional Nutrition Cluster and Minimum NiE preparedness and response capacity in LAC (UNICEF LAC Regional Office)
 9. Nutrition Information Systems (UNICEF, Kenya)
 10. Capacity Building for Integrated Programming (FAO)
- Side session: Update on Inter agency work on nutrition products

- Side session: Launch of CMAM Report software
- SAM and MAM caseload estimates and links to programming

Creation of a GNC identity ad hoc group terms of reference, March 2011

There are a number of issues within the Global Nutrition Cluster (GNC) that are not well defined in relation to how nutrition cluster activities are framed and branded. These issues were raised in plenary with the GNC group, and there was broad consensus that these issues should be dealt with through a time bound ad hoc group. The specific issues and suggested way forward is detailed below with estimated timeframes summarized in Table 1.

CATEGORIZATION OF ACTIVITIES

The GNC is comprised of individuals as well as agencies. Numerous activities are conducted by those individuals and agencies, either singly or in partnership, which contribute to the resources, guidance, and understanding that are essential to improving the performance of the nutrition cluster as a whole.

In order to avoid ambiguities around leadership and ownership of these activities, a clear system of categorization for these activities was proposed prior to the GNC meeting for discussion:

1. Cluster led activities
2. Cluster collaborative activities
3. Activities of cluster interest

The specific criteria initially suggested included who was contributing technical expertise in terms of staff time, whether or not the activity is included in the GNC annual workplan, and the source(s) of funding. There is a need however to detail the specific criteria to be used for each category, as well as to define who is responsible at each

level of the project cycle (e.g. conceptualization, development, consultation, dissemination, duplications of materials, revising materials, fundraising for the use and dissemination of materials, responsibility for updates).

The ad hoc group suggested that definitions should at least differentiate between:

- An output that is funded by the GNC and endorsed by the GNC.

GNC is specified here in order to distinguish this level versus country cluster outputs or outputs from the cluster approach in general.

- An output that is produced using funds mobilized by another GNC partners and recognised/recommended by the GNC.
- An output that is produced using cluster and other GNC partner agency funds that is recognized by the GNC.
- Resources that existed before the establishment of the GNC or were developed outside of the GNC but are supportive/in line with the GNC's work.

The ad hoc group proposed drafting definitions for broader consultation with the GNC coordination team and GNC group, to then be applied to the 2011/2012 GNC workplan by the GNC coordination team and working group co-chairs. Through this process, remaining weaknesses in these definitions will be made clear, which can then be incorporated into the working definitions and included in the GNC Standard Operating Procedures.

ENDORSEMENT/RECOGNITION/RECOMMENDED PROCEDURES

There are materials that have been developed by the GNC, which are referred to as cluster tools (e.g. IRA, Harmonized Training Package v1, Toolkit for Nutrition in Emergencies 2008 etc.). There is however no formal endorsement/recognition/recommendation procedure in place to ensure that products that are labelled as GNC outputs or tools have the appropriate buy-in and sign off by GNC members. *There is no clear process for vetting technical accuracy, quality, or tone of these outputs or tools.*

Similarly, there are activities and outputs where members of the GNC or the GNC as a body may collaborate with other agencies, or through consortium efforts, to produce them. *There is also no formal endorsement/recognition/recommendation procedure in place ensure that products where the GNC collaborates in the generation or adaptation of a material, or is in support of larger consortium efforts is transparent, nor a clear definition of what this "seal of approval" might signify.* For example, the MIRA tool is being developed and will be "endorsed" as a multi cluster tool²⁸. How will this happen? There have been issues in the past that have not yet been resolved, e.g. in the finalization of the IRA tool the health cluster made modifications to the IFE questions that were not deemed appropriate by those experts who drafted the originals. As a result, the GNC may not necessarily agree with or support the contents of this tool as adhering to international norms or standards in nutrition.

28. Since the notes of the meeting in 2011 were written, the MIRA has become an official IASC Tool.

ANNEX 4.

Key informants interviewed

No.	Name	Position
1	Dobamo, Anteneh	NCC Sudan
2	Schumacher, Britta	WFP, Programme Policy Officer
3	Adbullah, Saja	UNICEF, Chief of Nutrition Yemen
4	Barnett, Catherine	CPWG Coordinator
5	Belloq, Geraldine	Helpdesk, GNC-CT
6	Boyd, Erin	OFDA/USAID, Nutrition Advisor
7	Butler, Sarah	Save the Children, Nutrition Advisor
8	Chazaly, Catherine	ECHO, Food Assistance and Nutrition Policy Officer
9	Dent, Nicky	CMAM Forum
10	Desie, Samson	NCC Somalia
11	Dolan, Carmel	ENN
12	Doull, Linda	GCC for Health Cluster
13	Fedele, Stephano	UNICEF, Regional Nutrition Adviser
14	Forsythe, Vivienne	Independent consultant
15	Fritsch, Pascale	HelpAge
16	Golden, Kate	Concern Worldwide, Senior Nutrition Advisor
17	Gostelow, Lola	Independent consultant
18	Grant, Angeline	Ex RRT
19	Holland, Diane	UNICEF, Senior Nutrition Advisor
20	Ippe, Josephine	GCC for Nutrition Cluster
21	Israel, Anne Dominique	ACF, Senior Nutrition and Health Advisor
22	Kauffman, Domitille	FAO, Nutrition and Resilience Adviser
23	McGrath, Marie	ENN / IFE Core Group
24	Matunga, Leo	NCC Afghanistan
25	Perry, Abigail	DFID, Senior Nutrition Advisor
26	Porteaud, Dominique	GCC for Wash Cluster
27	Saparbekov, Ayadil	Deputy GCC for GNC
28	Seal, Andrew	Senior International Lecturer in Nutrition
29	Wasike, Paul	Ex RRT
30	Weizeprinzo, Zita	WHO, Technical Officer, Emergencies, Department of Nutrition for Health & Development
31	Whitney, Marie Sophie	ECHO, Global Nutrition Expert

Country consultations key informants**Mali**

32	NCC
33	UNICEF Nutrition Specialist
34	Chef de la Division Nutrition
35	Nutrition Advisor Save the Children

Myanmar

36	NCC/UNICEF Nutrition Specialist
37	ACF Health and Nutrition Advisor
38	Chair IYCF-E group - pending

Turkey/Syria

39	NCC/ GOAL
40	UNICEF Nutrition Specialist
41	Qatar Red Crescent - Health Education

ANNEX 5.

Review tools - online survey questionnaire and key informant interview guides

ONLINE SURVEY QUESTIONNAIRE

You are being contacted alongside all NCCs and IMOS working in country clusters to complete the online survey. Your views will directly inform the options and recommendations on defining the GNC's role in technical issues in support of country clusters.

The questionnaire has been structured in four short sections, with a total of 46 questions.

NiE has been used as shorthand for Nutrition in Emergencies. For the purposes of this review, technical role is limited to that provided to the nutrition cluster collective by all its partners (and therefore differentiated from any technical roles played to support your agency specific programme staff). For ease of interpretation, the term technical role has been split into three main components:

- *Technical support is a reactive function to specific questions and queries involving specific support on how to operationalise use of existing guidance and protocols, and harmonise reporting formats and approaches.*
- *Technical training is about offering teaching/instruction on technical aspects of Nutrition in emergencies this is proactive.*
- *Technical guidance is about filling gaps in policies and guidelines regarding Nutrition in emergencies approaches and ensuring technical guidance and protocols are available for generic use.*

Many thanks in advance for your time. Your answers are very valuable.

SECTION ONE

Your profile

- Q1:** What is your current position?
- Q2:** If you are an NCC or IMO, are you double-hatting?
- Q3:** How long have you been in your current position?
- Q4:** What is your current duty station location?
- Q5:** Who is funding your current position now?

SECTION TWO

National level nutrition cluster history and structure

- Q6:** What is the Nutrition Cluster activation status in your country now?
- Q7:** Is nutrition a stand-alone cluster or a combined one with another sector?
- Q8:** Has nutrition been a combined cluster in the past?
- Q9:** Who is the Cluster Lead Agency (CLA)?
- Q10:** Which of these best describes the current country level nutrition cluster coordination structure (adapted from the Nutrition Cluster Handbook p16)?
- Q11:** How often have national level Nutrition Cluster meetings been held this year? Answer even if the meetings are combined with another sector.
- Q12:** How many nutrition cluster partners are registered in the cluster in country?
- Q13:** In your opinion, what percentage of these registered cluster members would you say are actively contributing to the country level nutrition cluster on a regular basis? (the term "actively contributing" refers to any activities over and above attending cluster meetings).

- Q14:** Of the total nutrition cluster membership, allocate the estimated proportion that belongs to each of the following categories. (Your total should be 100).
- Q15:** Are there any sub-national nutrition clusters in place in country?
- Q16:** Which national level Technical Working Groups (TWGs) are in place now?
- Q17:** Is there a mapping available of available technical resources in your cluster in relation to NiE?
- Q18:** Is there a Strategic Advisory Group in place at the national level for the nutrition cluster?

SECTION THREE

Identification, prioritisation and management of technical gaps and issues in NiE

- Q19:** Are there technical areas in NiE that are not being currently met using country level nutrition cluster staff (NCC, IMO) cluster members and CLA staff?
- Q20:** Select the technical area in NiE that have been addressed by the national level cluster since you have been in post. This can include agreement on technical areas and developing guidance, reporting formats, databases etc. (More than one answer is allowed).
- Q21:** Select the technical areas in NiE that have been addressed by the country level nutrition cluster by resorting to external expertise since you have been in post. This can include agreement on technical areas and developing guidance, reporting formats, databases etc. (More than one answer is allowed).
- Q22:** Technical expertise can be drawn from a wide range of resources. When specific NiE technical expertise is needed at country cluster level, how do you fill the gap? (More than one answer is allowed).
- Q23:** Select the technical areas in NiE that have not

been able to be addressed by your country level nutrition cluster members due to lack of technical expertise. (More than one answer is allowed).

- Q24:** For the answer to question 23 above, what were the main reasons behind not being able to access technical expertise to support the country cluster technical issues (More than one answer is allowed).
- Q25:** Please provide examples of the specific technical issues (e.g. caseload calculation, BMS management, provision of wash services in OTPs etc.) you have been able to solve at country cluster level using technical expertise that you have access to in country through the cluster members and CLA? (Several examples are allowed under each technical area).
- Q26:** Please provide examples of the specific technical issues (e.g. caseload calculation, BMS management, provision of wash services in OTP etc.) you are currently faced with at the country cluster level, that in your view, require additional technical expertise to what you have access to in country through your cluster members and CLA. (Several examples are allowed under each technical area).
- Q27:** Which of the following nutrition colleagues have you requested technical support from successfully to address technical NIE issues? (More than one answer is allowed).
- Q28:** Complete the following sentence with ONE choice from the menu. "When the country level nutrition cluster needs technical support for specific technical issues, my first point of call is mainly _____" GNC Helpdesk.

SECTION FOUR

Ways forward on country level nutrition cluster support on technical NiE issues

- Q29:** One of the key roles of the GNC Coordination team, cluster membership and the CLA is to provide technical expertise in relation to NiE to the national cluster coordination platforms. (no label) Disagree

- Q30:** The GNC Coordination team, cluster membership and the CLA should mainstream all technical requests raised by NCCs systematically and provide the appropriate expertise. (no label) Agree
- Q31:** The GNC Coordination team, cluster membership and the CLA should mainstream all technical requests raised by NCCs and systematically out-source the appropriate technical expertise.
- Q32:** I have found the monthly NCCs call to be a good forum for resolving specific technical issues I have raised.
- Q33:** The GNC Coordination Team should continue to host monthly NCC calls that include the possibility of raising and resolving technical NiE Issues.
- Q34:** The GNC collective should host a helpdesk to respond to NiE issues raised by NCCs.
- Q35:** The GNC collective should host a NiE Community of Practice and organise regular webinars and discussion on NIE to respond to NiE issues raised by NCCs.
- Q36:** The GNC collective should host an online forum where technical requests from NCCs and IMOs can be posted and answered in a timely manner by members of the cluster.
- Q37:** The GNC collective should sign formal partnership agreements with technical institutions to outsource technical expertise to respond to NiE issues raised by NCCs and IMOS on pre-agreed technical areas.
- Q38:** Technical NiE surge experts should always be deployed in L3 emergencies alongside NCCs and IMOs.
- Q39:** Regular technical field visits to L3 countries are needed alongside cluster performance monitoring visits.
- Q40:** Who do you think is best suited to provide capacity development in NiE and organise the delivery of regular NiE trainings for NCCs / IMOs and standby partners?
- Q41:** Who do you think is best suited to mainstream technical requests from NCCs and initiate a Task Force to address a specific technical nutrition issue?
- Q42:** Who do you think is best suited to mainstream technical requests from NCCs and manage surge capacity to address a technical nutrition issue at country cluster level?
- Q43:** Given the nature of the technical areas you have mentioned, the gaps and the role of the GNC collective, what models of ensuring technical expertise in NiE would work best to support country level nutrition clusters? (please respond in your own words).
- Q44:** Do you have any other thoughts or suggestions on the management of technical nutrition issues for country level nutrition clusters?
- Q45:** Would you be willing to be interviewed to discuss this topic further with the consultants?
- Q46:** Please provide your full name.

Key informant interview guides

A generic interview guide was developed and then adapted to interview the GNC-CT, UNICEF, other UN agencies, NCCs, IMOs and RRTs, donors, Individuals and academics and representatives in nutrition technical fora, and global cluster coordinators in other sectors.

RE-EXPLAIN PURPOSE:

To inform decision making around the GNC's role in technical issues in support of country clusters, under the current set up of GNC partners and use of National Cluster Coordinators, Information Management Officers and Technical Working Groups at country level. This will feed into the development of a specific Task Force at GNC level on how any technical support role gaps are to be addressed.

The specific TOR objectives are the following:

- 1. Identify what the technical needs are of the Country Nutrition Clusters and the GNC.*
- 2. Review the level and the scope of engagement of the GNC and country nutrition clusters in Nutrition*

in emergencies programming at global and country level.

3. Define how the GNC/country clusters collaborate to meet the needs.

For the purposes of this review, technical role²⁹ has been split into three main components:

- *Technical support* is about responding to questions and queries from NCCs; this is a reactive function.
- *Technical training* is about offering teaching/instruction on technical aspects of NIE; this is proactive.
- *Technical guidance* is about filling gaps in policies and guidelines regarding NIE approaches.

GENERIC INTERVIEW GUIDE:

- **The meaning of technical role in Nutrition in Emergencies**

The working definition of technical role for this review, distinguishes 3 categories,

i) Technical support, ii) Technical training and, iii) Technical guidelines.

Are the 3 equally easy to understand? How would you define each component? Do you think they cover all aspects of NIE technical matters?

- **Specific technical roles you fulfil in support of the GNC at global/country/individual level (TOR)**
- **Identification and prioritisation of technical gaps and issues in NiE**

Can you describe how technical gaps in NIE are identified and prioritised at the moment?

- **Experience of technical requests from other actors**

What other actors come to your institution/organisation for technical nutrition expertise?

- **Specific technical roles your institution/organisation has played/would like to play in support of the GNC at global/country/individual level or specific technical roles your organisation is fi-**

²⁹. As used in the GNC Governance review 2013 (Gostelow)

ancing/has financed/has rejected at GNC at global/country/individual level

Using the 3 categories we have just discussed, has the Nutrition Cluster at global/national/individual level requested your expertise? How did it work? Describe the processes and channels of communication used. *Probe for examples*

Are there any technical areas you feel you are not suited to support the GNC?

Which areas of technical expertise are your institution/organisation best placed to offer the Nutrition Cluster collective?

- **Experience of management of technical nutrition requests and sourcing/mobilising expertise**

Using the 3 categories we have discussed, how have technical nutrition requests been raised, and dealt with at Country Cluster level in [*insert time frame appropriate to KI length of time in post etc.*]?

- **Views on technical role the GNC has and should play**

How do you see the role of the GNC at global level (the CT and the 40+members) in providing technical expertise, training and guidelines in NIE?

How would you recommend this role be improved and be more adequate to your needs? How would this affect your work?

- **Views of possible models of ensuring technical expertise is provided to country level clusters and TWGs**

Given the nature of the technical areas you have mentioned, the gaps and the role of the GNC at global level, what models of ensuring technical expertise would work best for country level clusters?

How can this be achieved?

SPECIFIC QUESTIONS FOR UNICEF AS CLA

- **Specific technical roles UNICEF has played in support of the GNC at global/country/individual level**

How has UNICEF supported the Nutrition Cluster collective on technical matters to date? Can you provide examples?

In its role as Cluster Lead Agency (CLA), what is the current policy and guidance on how to provide technical expertise for NIE? How easy is to implement the current guidance?

Is it always clear for UNICEF staff when technical expertise should be provided to the Nutrition Cluster Collective at global/country and individual staff level? *Probe for examples and reasons.*

How could the technical role of the GNC be articulated with UNICEF at global, regional and country level to avoid duplication and meet the gaps? *Probe for experience of technical requests as CLA – specific examples to tease out differences between UNICEF and GNC.*

In some countries and at sub cluster level, the NCC role is often done by a UNICEF staff member. What are the lessons learned of double hatting with regard to technical issues? *Probe request formulation, challenges, bottlenecks and ways forward.*

SPECIFIC QUESTIONS FOR OTHER GLOBAL CLUSTER COORDINATORS

- **The meaning of technical role in the cluster system**

How do you identify the technical role of the [specify sector] cluster?

Does current IASC guidance or other IASC mechanisms make the technical function role clear? How is technical function defined?

Can you describe how the role is fulfilled by the many actors and how this system came about?

How do you monitor a specific cluster's progress on fulfilling this role?

- **Collaboration among clusters**

Are there any technical issues which are best addressed through collaboration with other clusters? *Probe for examples and for collaboration with Nutrition Cluster.*

- **Experience of models ensuring technical expertise to country level clusters and TWGs**

Given the nature of the technical areas you have mentioned, and the role of the global level cluster, what models of ensuring technical expertise work best for country level clusters?

- **Views of possible models of ensuring technical expertise is provided to country level clusters and TWGs**

What possible models of ensuring technical expertise to country level clusters do you think would work best and why?

- **Recommendations to GNC?**

Are there any technical issues which you think the GNC could address differently?

ANNEX 6.

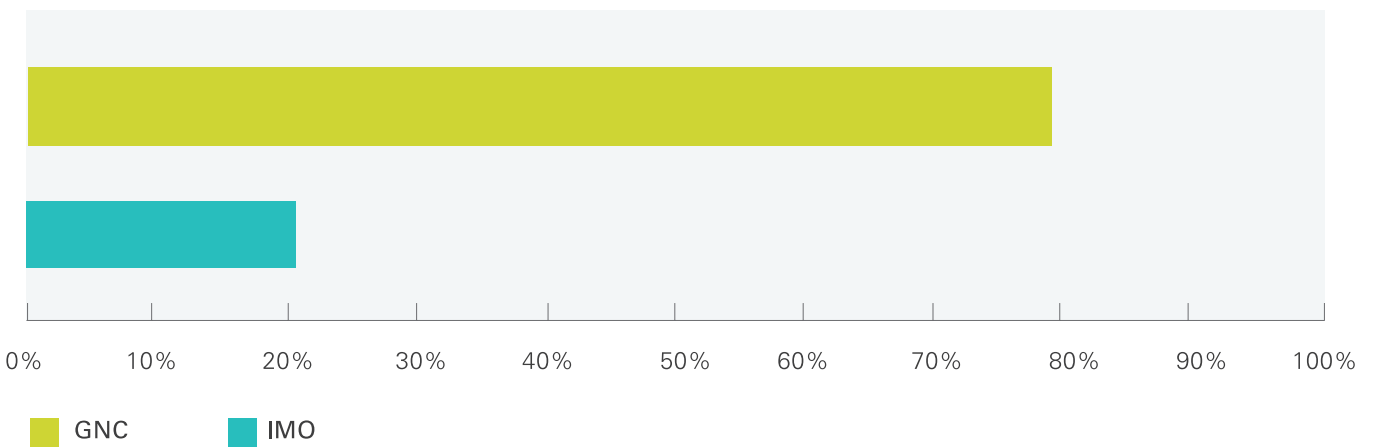
Overview NCC and IMO online survey results

1. COUNTRY CLUSTER CHARACTERISTICS

Q1: ROLE / POSITION (N=24)

What is your current position?

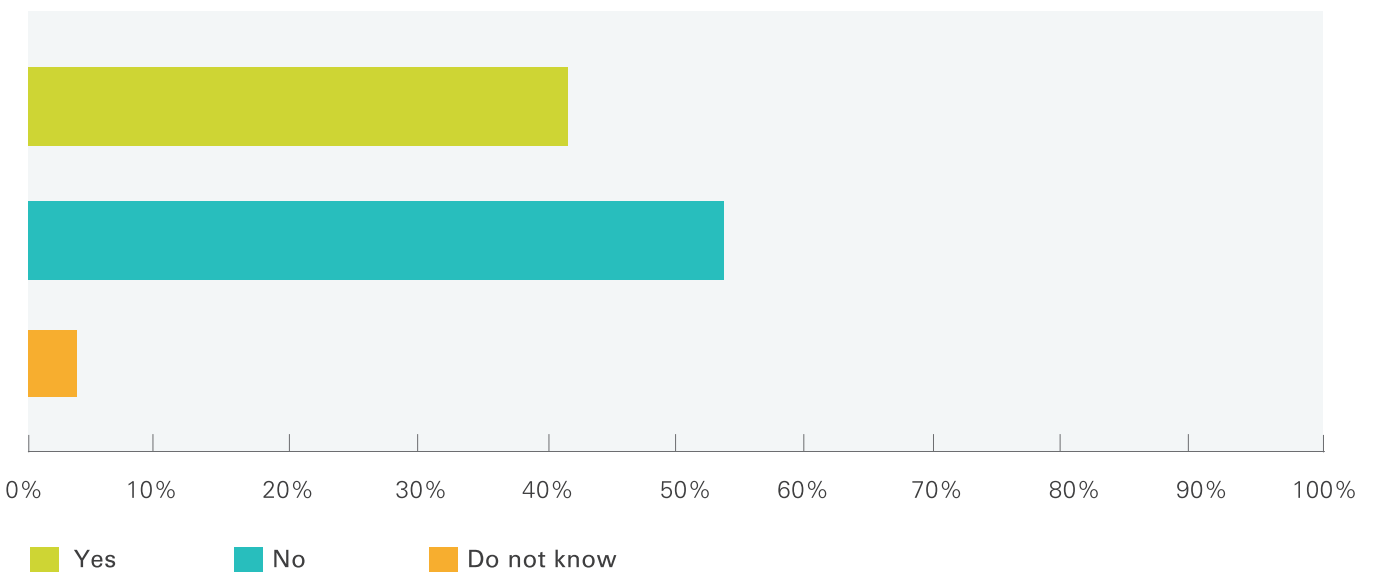
answered: 24 | skipped: 0



Q2: DEDICATED NCC / IMOS (N=24)

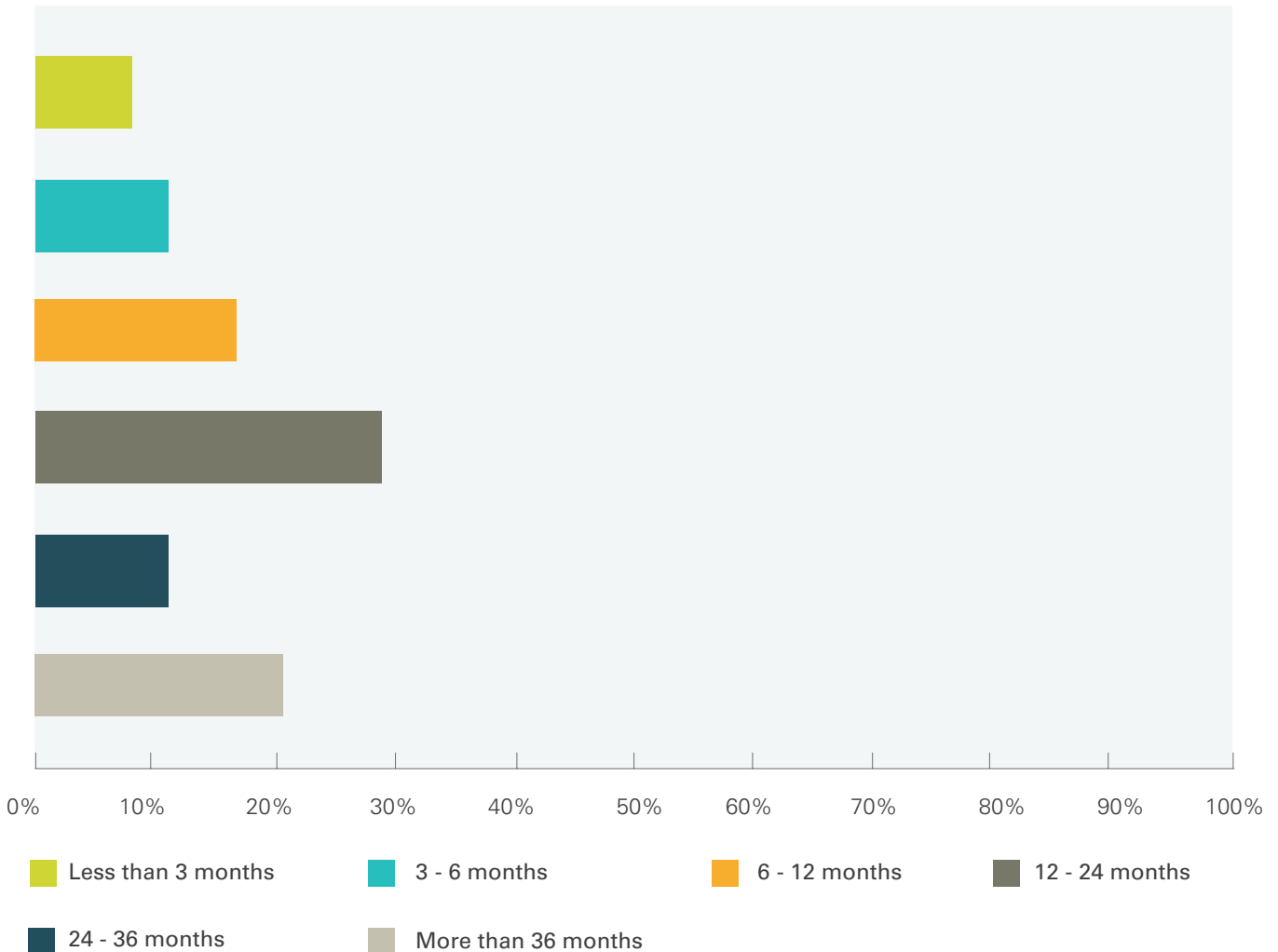
If you are an NCC or IMO, are you double-hatting?

answered: 24 | skipped: 0



Q3: TIME IN POSITION (N=24)**How long have you been in your current position?**

answered: 24 | skipped: 0

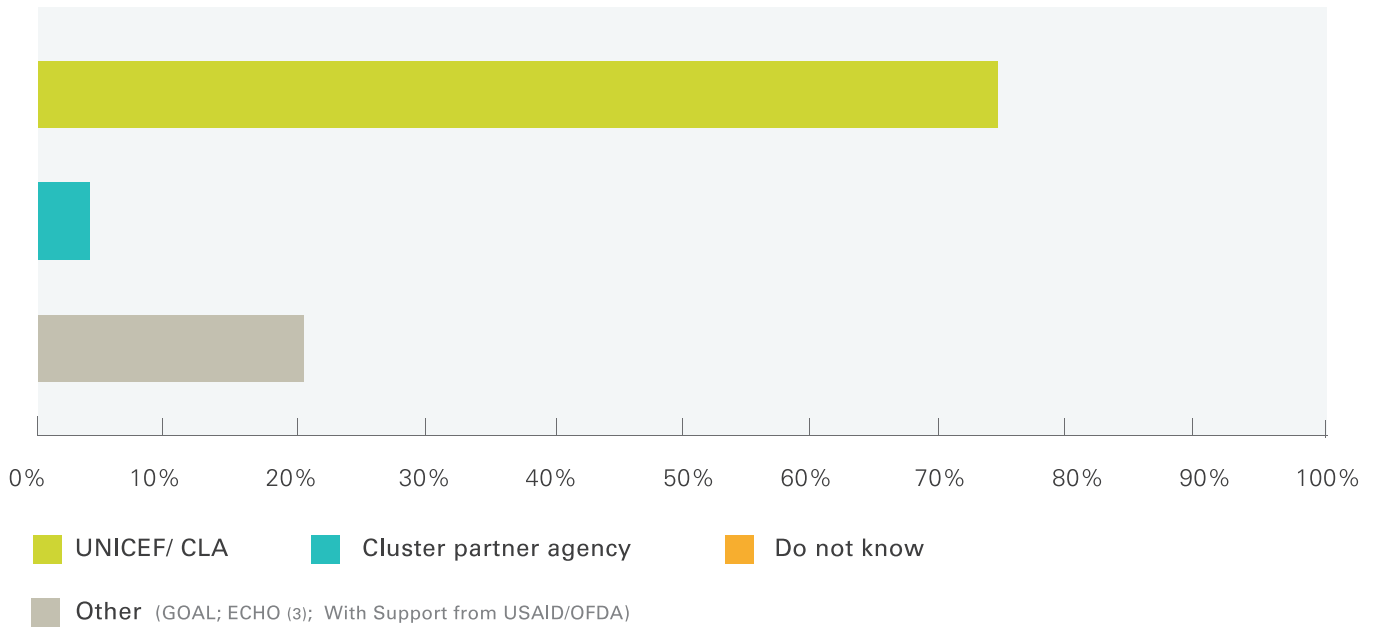
**Q4: CURRENT DUTY STATION (N= 21)**

Somalia (Nairobi)	Kenya	Turkey	Mali
South Sudan	Chad	Niger	Syria
CAR	Sudan	Ethiopia	Myanmar
Mauritania	Nepal	Bangladesh	Philippines
RDC	Sri Lanka	Yemen	Guinea Conakry
Afghanistan			

Q5: POST SOURCE OF FUNDING (N=24)

Who is funding your current position now?

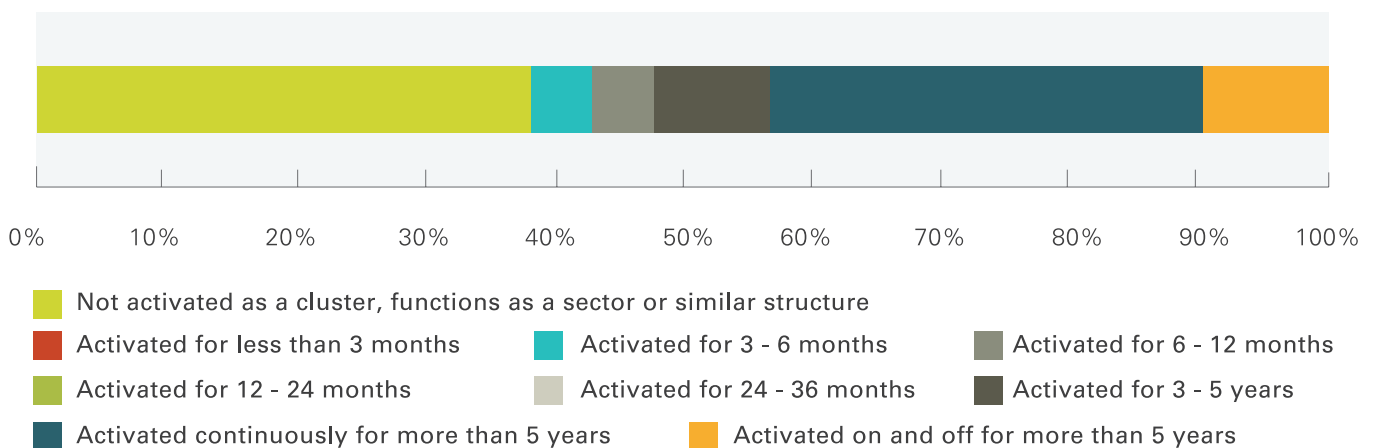
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Q6: ACTIVATION STATUS OF THE CLUSTER (N=21)

What is the nutrition cluster activation status in your country now

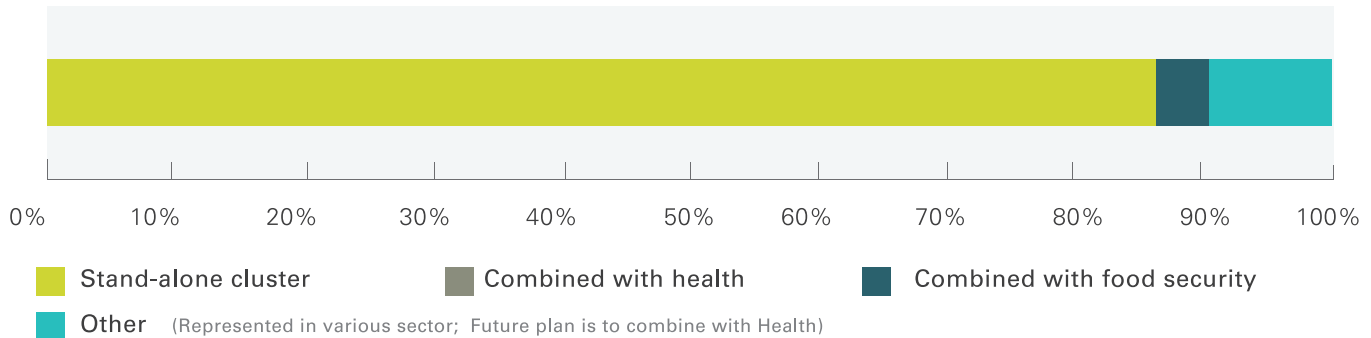
answered: 21 | skipped: 0



Q7: STAND-ALONE CLUSTER STATUS (N=21)

Is nutrition a stand-alone cluster or a combined one with another sector?

answered: 21 | skipped: 0

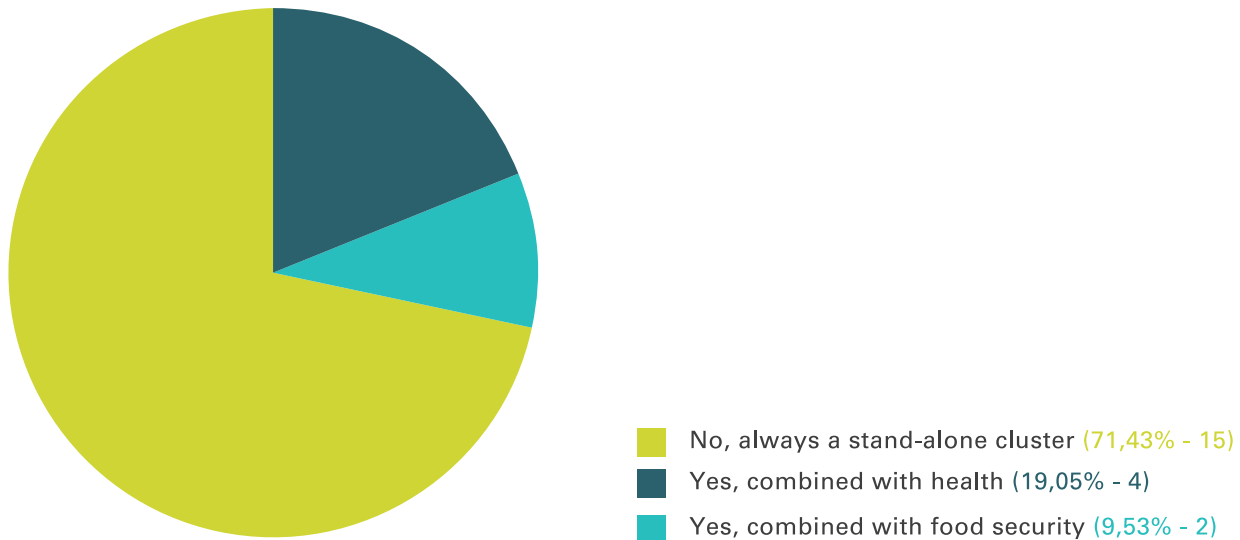


Q8: STAND-ALONE CLUSTER STATUS IN THE PAST (N=21)

Has nutrition been a combined cluster in the past?

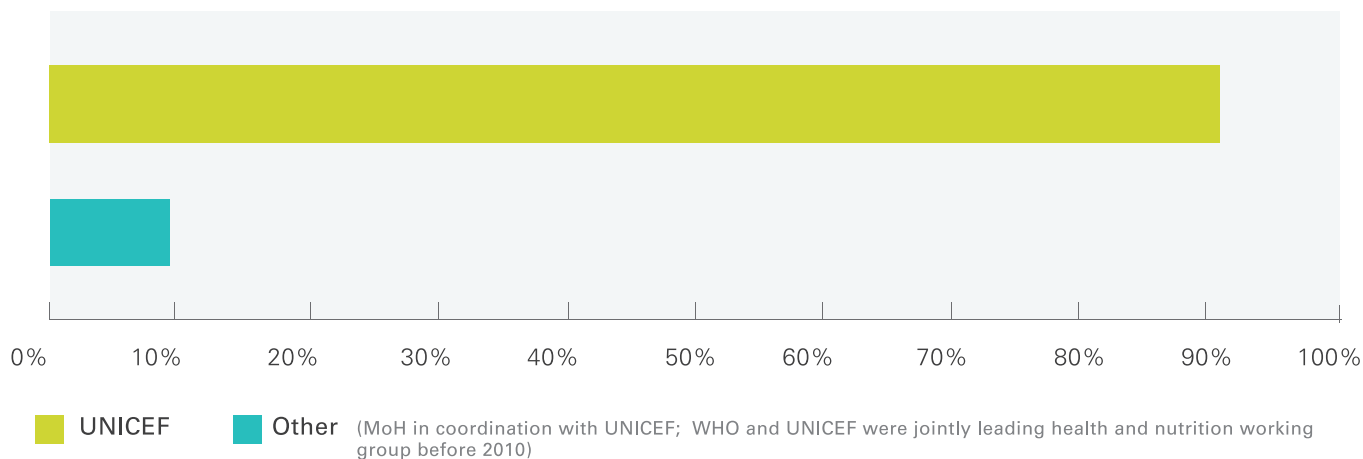
answered: 21 | skipped: 0

Activated for less than 3 months



Q9: CLUSTER LEAD AGENCY (N=21)**Who is the Cluster Lead Agency (CLA)?**

answered: 21 | skipped: 0

**Q10: COUNTRY LEVEL NUTRITION CLUSTER COORDINATION STRUCTURE (ADAPTED FROM THE NUTRITION CLUSTER HANDBOOK P16).**

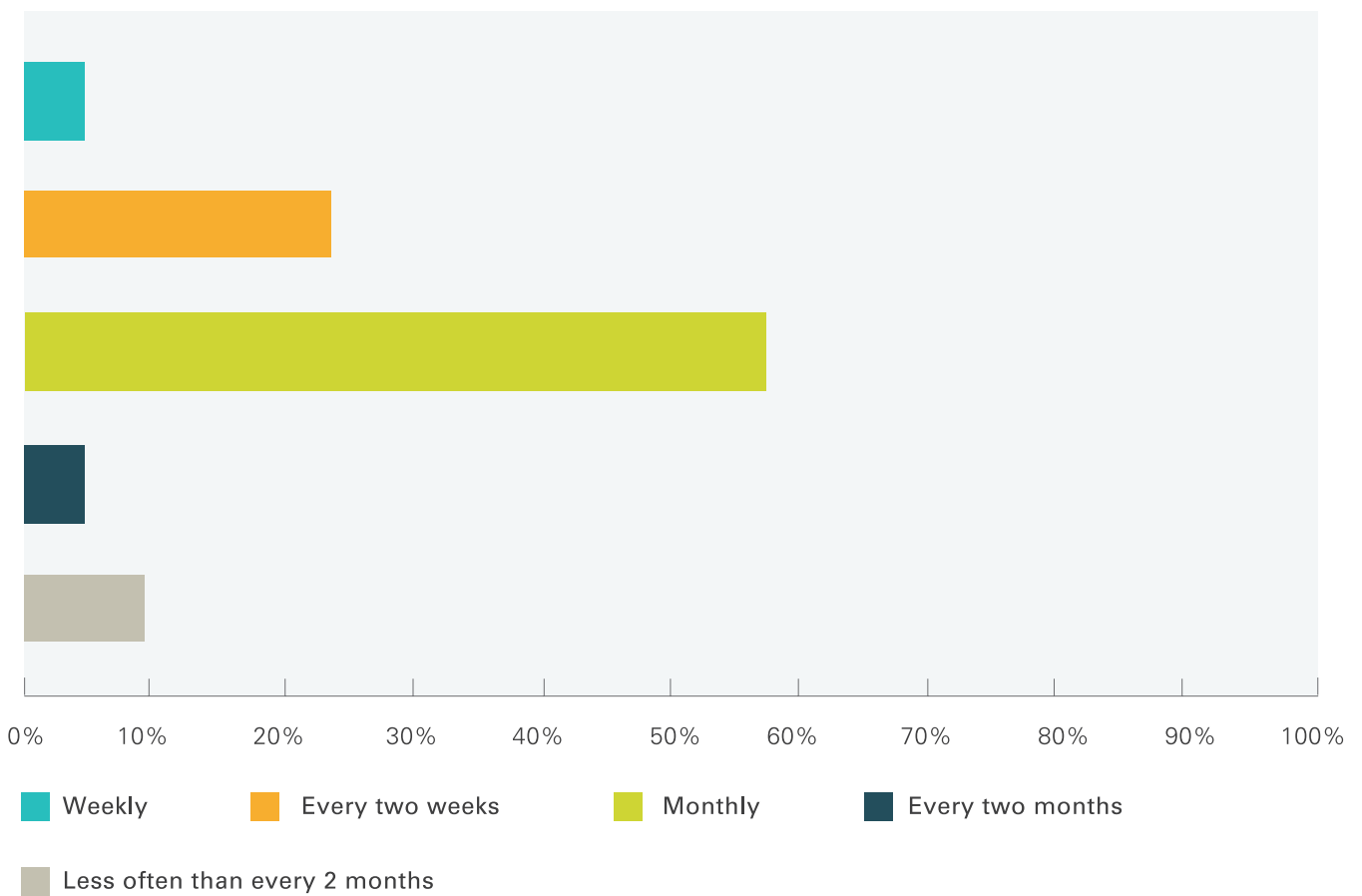
Answer Choices	Responses	
Cluster not activated currently	9,52%	2
National authority leads the nutrition coordination with no additional support from the Nutrition CLA (single leadership model, no designated CLA-led Nutrition Cluster support)	0,00%	0
National authority leads the nutrition coordination with support from the Nutrition CLA (co-leadership model, between government with CLA-led Nutrition Cluster CLA, double hatting)	23,81%	5
National authority leads the nutrition coordination with support from the Nutrition CLA (co-leadership model, between government with CLA-led Nutrition Cluster by dedicated NCC and / or IMO)	42,86%	9
Nutrition cluster coordination alongside the national authority (separate leadership models, no coordination between government and CLA-led Nutrition Cluster)	0,00%	0
Coordination established through the Nutrition Cluster (single leadership model CLA-led Nutrition Cluster is the main coordination mechanism, for all nutrition actors)	14,29%	3
Other (please specify) (Coordination led by INGO and CLA; UNICEF lead, co lead by national authority)	9,52%	2
Total		21

Q11: CLUSTER MEETING FREQUENCY (N=21)

How often have national level nutrition cluster meetings been held this year? Answer even if the meetings are combined with another

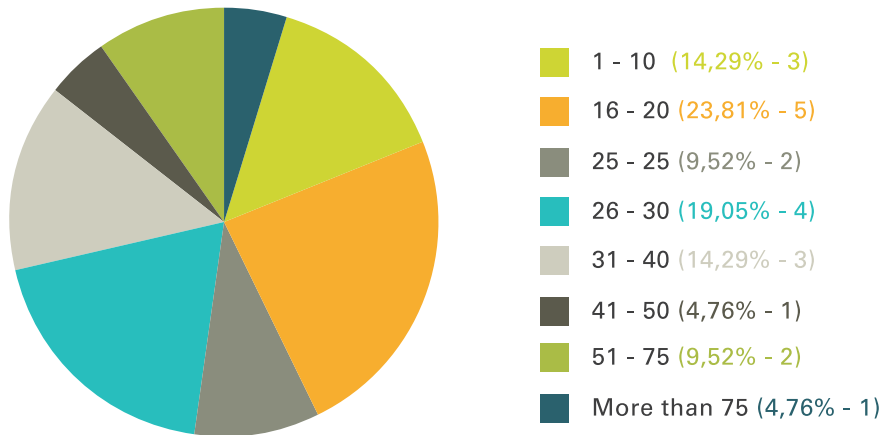
sector

answered: 21 | skipped: 0



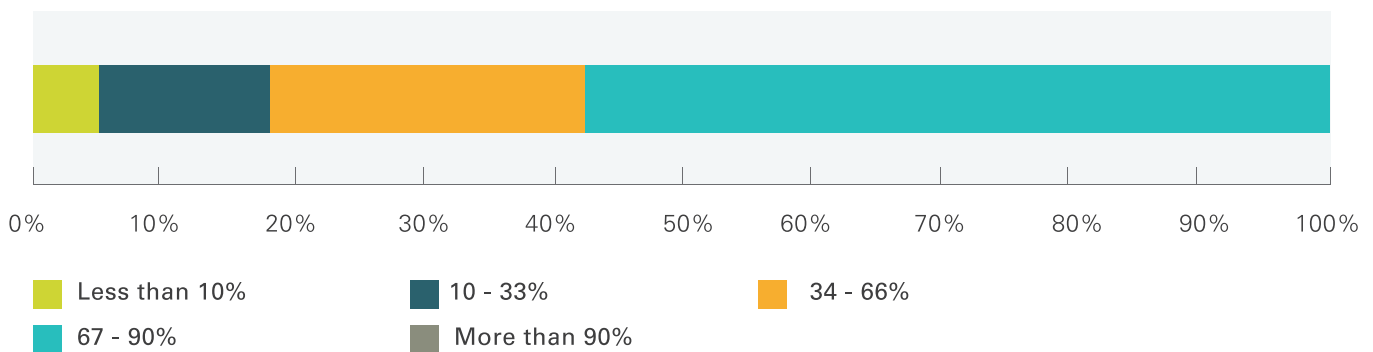
Q12: NUMBER OF CLUSTER PARTNERS (N=21)**How many nutrition cluster partners are registered in the cluster in country?**

answered: 21 | skipped: 0

**Q13: ACTIVE CONTRIBUTION OF PARTNERS (N=21).****In your opinion, what percentage of these registered cluster members would you say are actively contributing to the country level nutrition cluster on a regular basis?**

(the term "actively contributing" refers to any activities over and above attending cluster meetings)

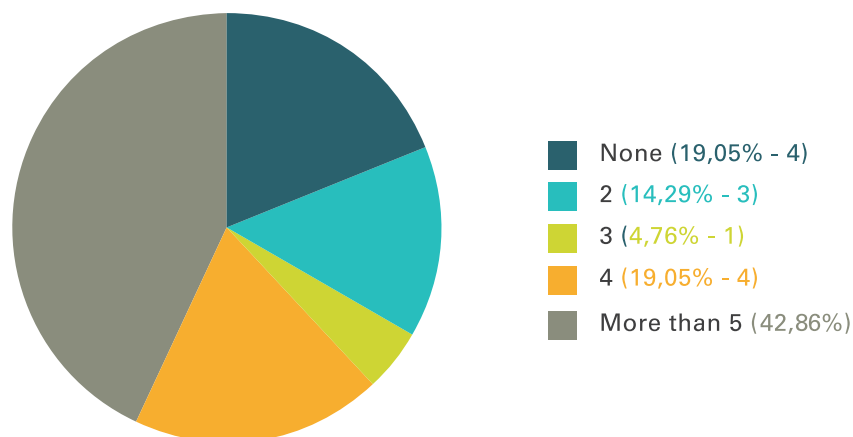
answered: 21 | skipped: 0



Q14: PRESENCE OF SUB-NATIONAL CLUSTERS (N=21)

Are there any sub-national nutrition clusters in place in country?

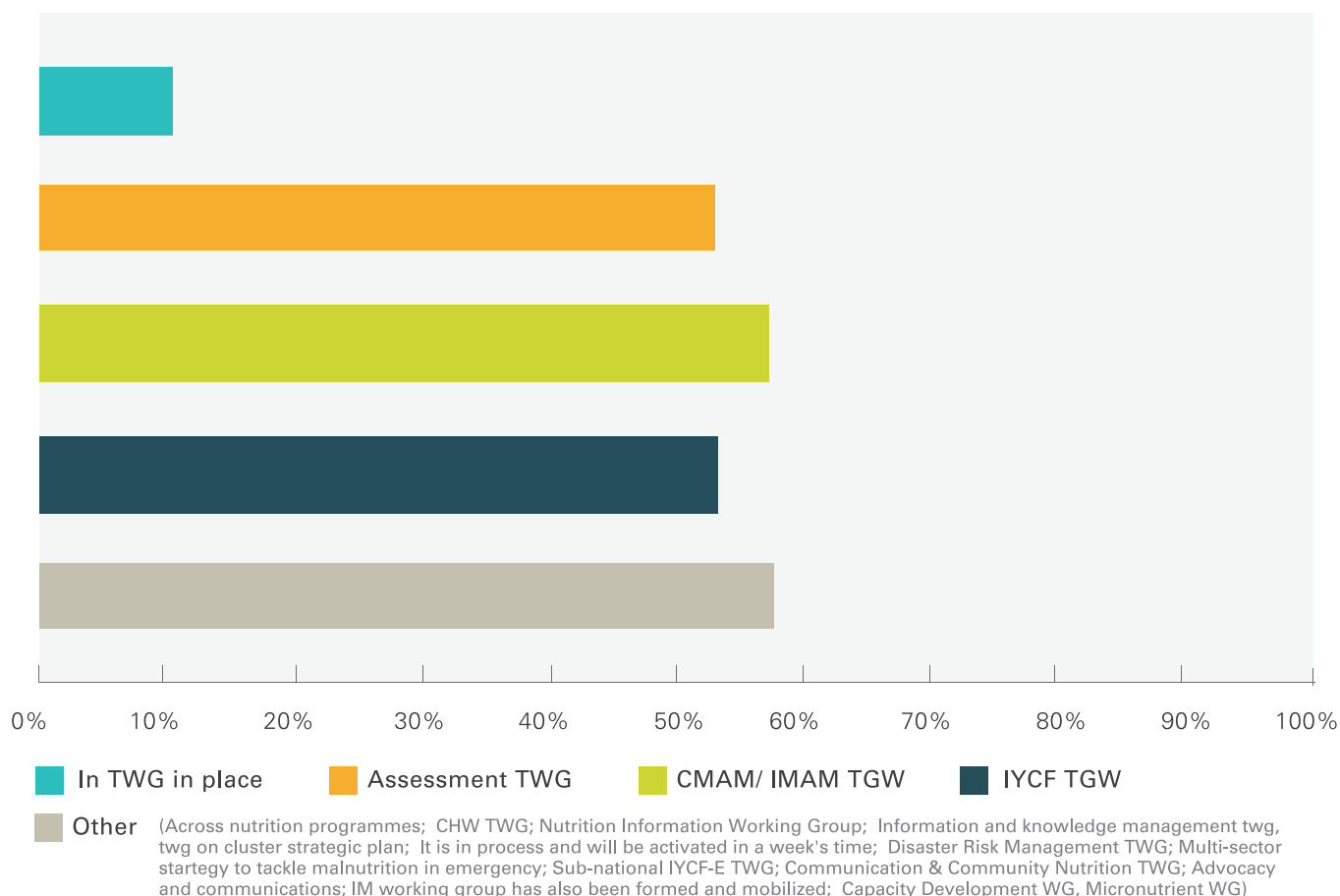
answered: 21 | skipped: 0



Q15: PRESENCE AND TYPE OF TWGS IN COUNTRY (N=21)

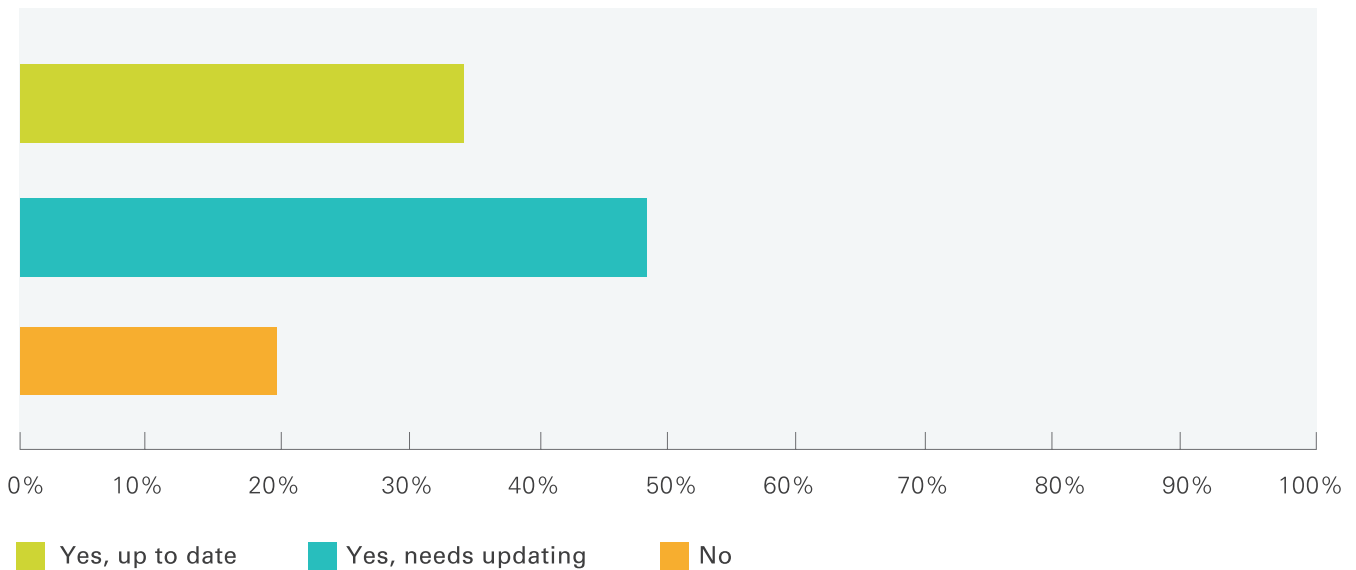
Which national level Technical Working Groups (TWG) are in place now?

answered: 21 | skipped: 0

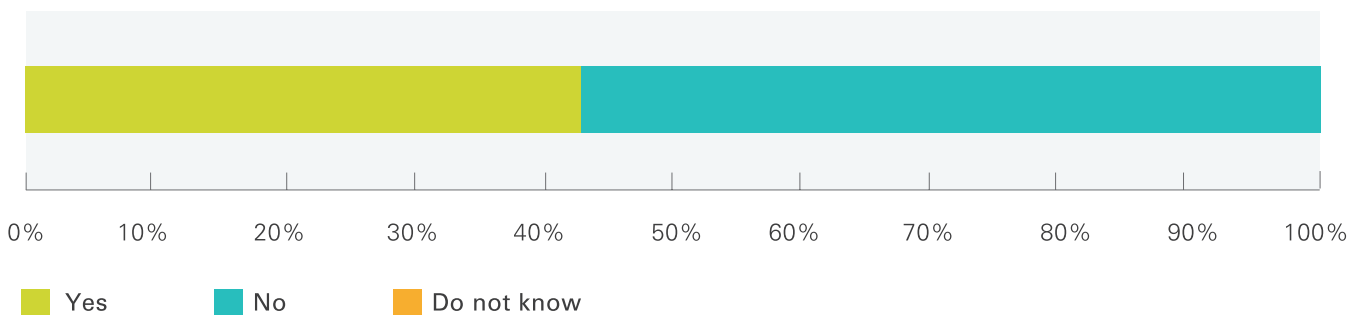


Q16: MAPPING AVAILABILITY OF TECHNICAL NIE RESOURCES IN COUNTRY (N=21)**Is there a mapping available of available technical resources in your cluster in relation to NiE?**

answered: 21 | skipped: 0

**Q17: EXISTENCE OF STRATEGIC ADVISORY GROUP (SAG) (N=21)****Is there a Strategic Advisory Group in place at the national level for the nutrition cluster?**

answered: 21 | skipped: 0



- **IDENTIFICATION, PRIORITISATION AND MANAGEMENT OF TECHNICAL GAPS AND ISSUES IN NIE.**

Results included in the main report.

- **WAYS FORWARD ON COUNTRY CLUSTER SUPPORT ON TECHNICAL ISSUES**

Results included in the main report.

ANNEX 7.

List of technical issues arising at country cluster level – (results from online survey questions 20, 21, 23, 25 and 26 and key informant interviews)

Answers to online survey questions 20, 21, 23, 25 and 26, edited to standardise the language used, can be found in the table below. Answers elicited during key informant interviews have also been tabulated below. During the GNC annual meeting in October 2015 some GNC partners³⁰ expressed an interest in being able to provide more technical expertise on some of the issues on the list as a way forward to supporting country level clusters.

Technical areas refer to broad NiE topics and **technical specific issues** refer to concrete examples of issues that fall under a technical area. For example:

Technical area: Micronutrients

Specific technical issue: Provision of MNPs to children also receiving fortified food baskets

Specific technical issues collected through the online survey

No.	Technical issues you have been able to SOLVE at country cluster level using technical expertise that you have access to in country through the cluster members and CLA	Technical issues you are currently FACED with at the country cluster that in your view, require ADDITIONAL EXTERNAL EXPERTISE to what you can access in country through your cluster members and CLA
Assessment, surveys and studies		
1	Coverage survey utilisation	Implementation of recommendations of the coverage surveys
2	Coverage studies	LQAS S3M Surveys and coverage assessment
3	Results presentation of the SMART survey to inter cluster partners	SMART data management
4	Caseload compilation and analysis and interpretation	Quality analysis of nutrition survey
5	Enhanced technical capacity on assessment	Nutrition Causal Analysis in emergency contexts Causality assessment and/or studies
6	SMART survey	Training of cluster members on cluster surveys & workshops conducted by experts from Coverage Monitoring Network (CMN)

30. For full list of participants at the September 2015 GNC annual meeting see <http://nutritioncluster.net/wp-content/uploads/sites/4/2015/06/2015-GNC-Annual-Meeting-final-report-Nairobi.pdf>

CMAM / IMAM		
7	Review of guidelines led by national research institution, guidelines on management of SAM among children under 6 months prepared by national experts in the cluster	Development of CMAM guideline, estimating caseload using WHZ but using MUAC in admission and discharging children in programme
8	Review of the IMAM guidelines	Operational research on alternative food products for treating SAM
9	Adaptation of CMAM/IMCI training materials to the Syrian context done by one partner with support of UNICEF	MAM management programmes
10	IMAM trends validation, supplies, management	Calculation, RUTF management caseload Increased >5 SAM caseload
11	Caseload calculation (SAM/MAM)	Caseload calculation (especially for MAM)
12	Bottleneck analysis	
13	National guidelines on SAM with caseload calculation and linking emergency response to development SAM programmes	Quality assurance of intensive therapeutic feeding programme
14	Resolving few technical issues including targeting criteria and simplification of guidelines	Guidance on discharge with MUAC
15	Admission criteria (revised WHO standards versus National protocol)	
IYCF-E		
16	Managing and Code monitoring	Advocacy and IYCF strategy development guidance
17	Development of operational guideline	Development of IYCF-E guidance
18	BMS tracking and monitoring of local partners distributions	Baby Hospital Friendly Initiative (BHFI)
19	Tools harmonisation	Expansion of IYCF-E in large scale needs additional support especially on the awareness part
20	Monitoring and reporting tools, BMS management and reporting of violations	Defining minimum indicators to follow IYCF-E
21	Propan studies to look at food composition	
Selective feeding programmes³¹		
22	Coverage expansion	Assessing the impact of BSFP
23	Development of admission and discharge criteria for TSP and TSFP programmes	Using MUAC only for admission and discharge
24	Linkage to other programmes	Stock management: handling supplementary food donated to partners
25	Integrate programming within the various components – SFP, OTP and SC	Refining and integrating protocols
Cash transfers/vouchers		
26	Still under pilot on nutrition cash transfer	Linking cash with other safety nets
27		Linking cash with nutrition

³¹. Selective Feeding Programmes are a subset of CMAM/IMAM, but have been listed here separately because they are listed so in the HTP modules and the NiE Competency Framework

Micronutrients		
28	Home fortification for emergency	Home fortification
29	Use of micronutrient powders (MNPs)	Assessment into the impact of micronutrients
30	Provision of MNPs to children also receiving fortified food baskets	
31	Nutrient analysis of food	
32	MNPs requirement, stock management	
33	Forecasting Vitamin A targeting and coverage	
34	Supplementation link to health activities such as vaccination campaigns	
Nutrition information and surveillance system		
35	IMAM database	How to set up sentinel sites, how to collect the data in hard to reach areas
36	Timely IMAM data from Nutrition centres for reporting	
37	Developing new nutrition information system data base	Indicators for nutrition surveillance at the health package
38	Data quality checks, and audit, linkage to other surveillance system	Use of Rapid SMS
39	Information on admissions in therapeutic centres on weekly basis	Data management
40	Completeness and quality of data	Nutrition surveillance systems with integrated emergency indicators
41	Nutrition Surveillance System trend analysis	
42	Community based nutrition surveillance	
43	Definition and harmonization of Nutrition Information System	
44	Early Warning /Early action system	
45	Web-based database	
Epidemic outbreak		
46	Cholera outbreak and nutrition	Epidemic investigation and control
47	Ebola nutrition response	

Specific technical issues to be resolved raised by key informants

Assessment, surveys and studies

1	Validation of SMART/rapid SMART and data triangulation especially in a rapid onset emergency
2	Lack of standardised generic nutrition assessment
3	Data information management quality

CMAM / IMAM

4	Sustainability of the CMAM model and mainstreaming it into the health system
5	Diagnosis on acute malnutrition and calculation of caseload (MUAC vs. WFH)
6	CMAM implementation in hard reach / context or with low partner capacity
7	In-patient treatment especially management of acute malnutrition under 6 months
8	Alternative recipe for SAM/MAM treatment
9	Estimation of supply and what to do in case of breakdown
10	Treatment for other groups age (> 5 years old/adolescent)
11	Management of MAM (in relation to caseload/supply/effectiveness)

IYCF-E

12	Building the capacity and bringing specific expertise
13	BMS management in contexts where breastfeeding is low
14	Counselling and behaviour change in emergency
15	Estimation of BMS supply
16	Process for issuing/endorsement of Joint Statement

Cash transfers/vouchers

17	Value of cash transfer
18	Harmonisation of cash transfers modalities

Micronutrients

19	Conducting micronutrient surveys
20	Guidance on MNP powder supplementation
21	Implementing MNP at scale

Epidemic outbreak

22	Ebola nutrition response
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Nutrition sensitive interventions

23	Working at scale
24	Minimum water, sanitation and hygiene package for nutrition interventions
25	Link up to Nutritional Causal Analysis (NCA)

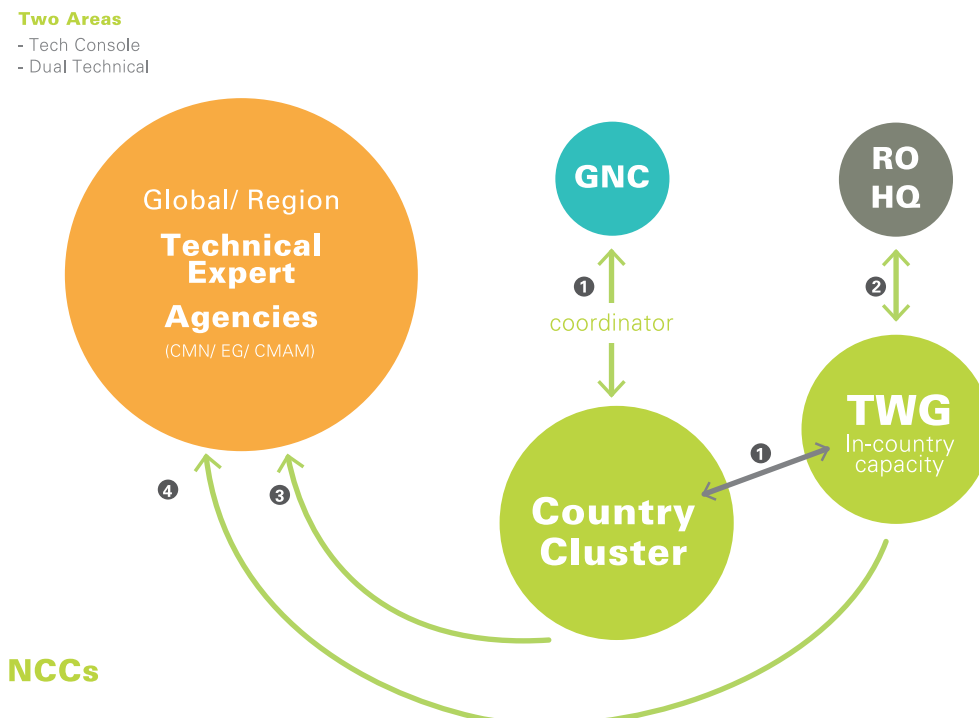
ANNEX 8.

Communication models for raising and responding to technical issues from country to global level

During the GNC annual meeting in October 2015 in the session on the Technical Role of the GNC collective, consultation on the ideal models for channelling technical requests were presented by four different groups. The outputs are presented below. All four models foresee more than one way of accessing technical expertise, using both in country and external expertise. The GNC SAG/GNC-CT model introduces new roles for a helpdesk and Technical SAG.

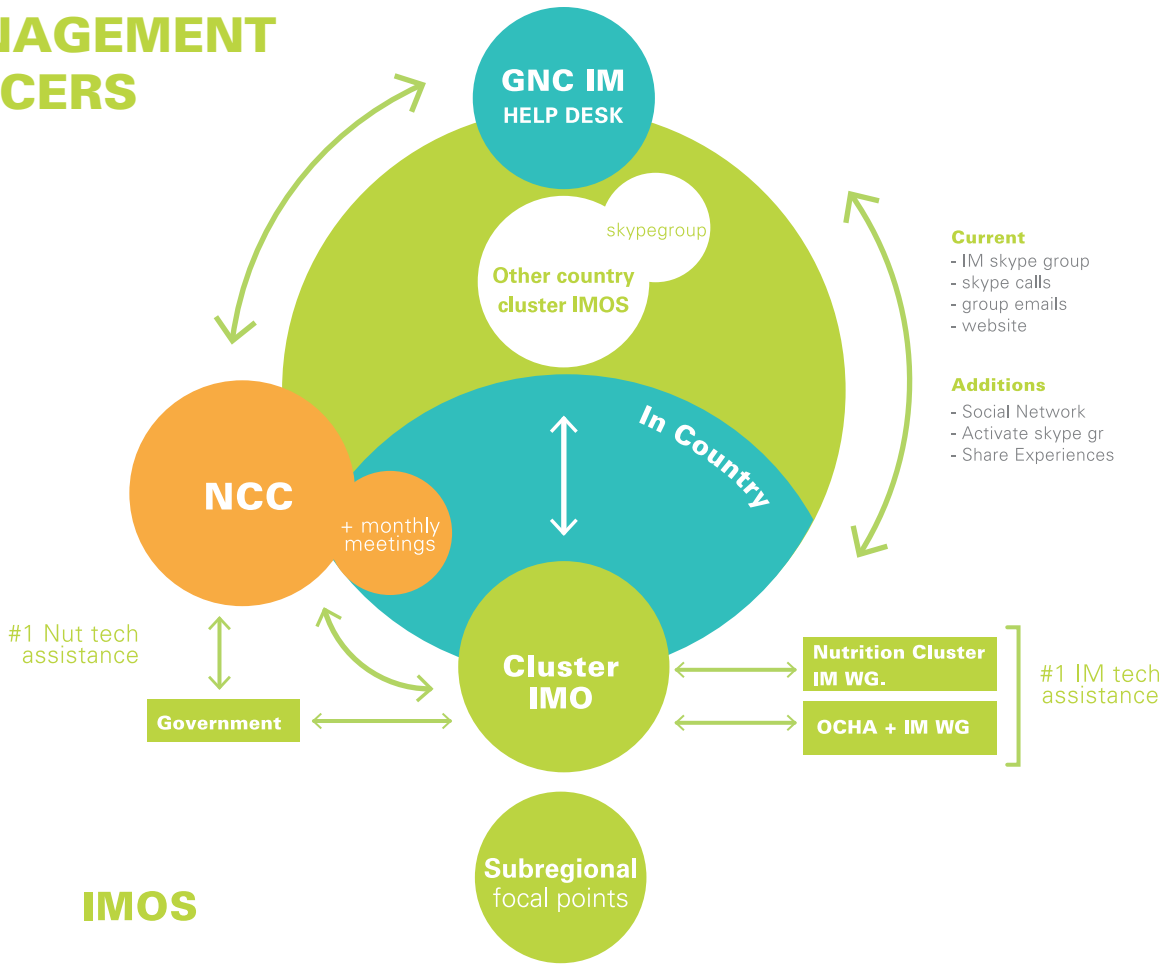
GROUP 1

NUTRITION CLUSTER COORDINATORS



GROUP 2

INFORMATION MANAGEMENT OFFICERS

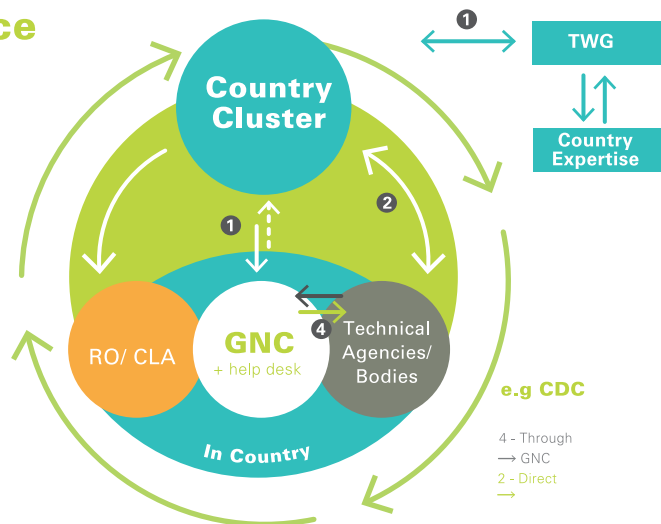


GROUP 3

RAPID RESPONSE TEAMS

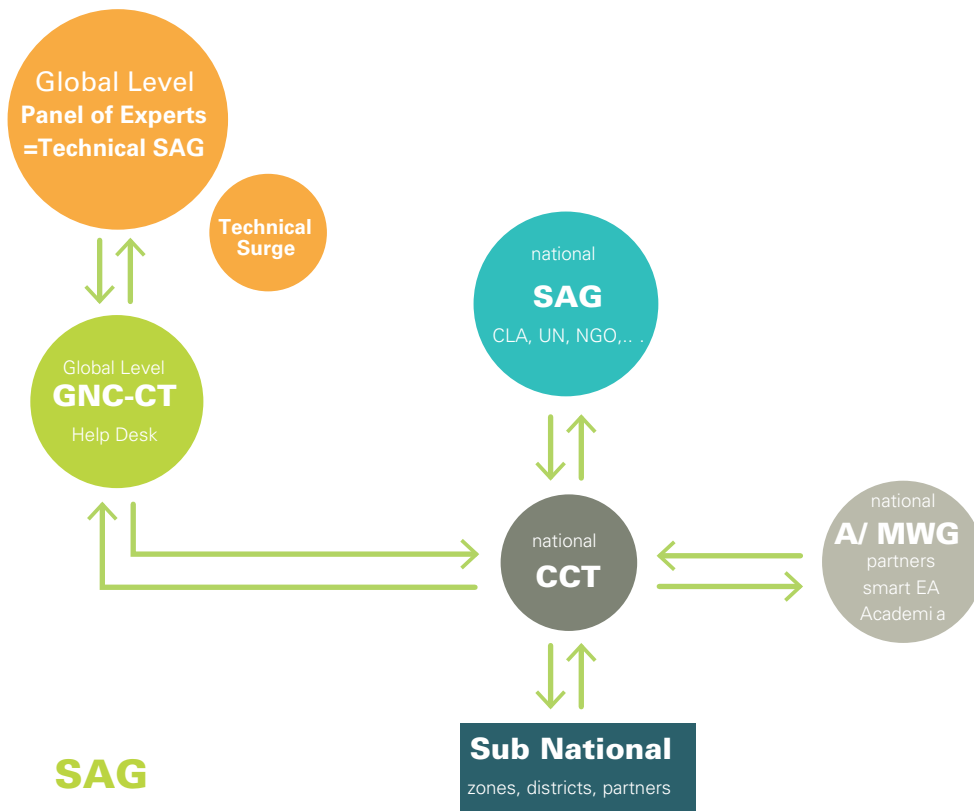
Technical Assistance Cycle

RRTs



GROUP 4

GNC SAG AND GNC-CT



ANNEX 9.

GNC structure and relevant technical role highlights

Source: Global Nutrition Cluster (GNC) Strategic Plan 2014-2016

STRATEGIC PILLARS 2014-2016

The GNC's work from 1 January 2014 to 31 December 2016 will fall under the following four pillars:

1. Partnership, communication, advocacy, and resource mobilization.
2. Capacity development in humanitarian coordination.
3. Operational and surge support to country clusters.
4. Information and Knowledge Management.

An overview of Pillars 2, 3 and 4 of the GNC SOPs which make reference to technical NIE role aspects (highlighted in red)

PILAR 2.

CAPACITY DEVELOPMENT IN HUMANITARIAN COORDINATION

This involves identifying specific capacity gaps hampering optimal cluster coordination, particularly at the country level; identifying and/or developing tools and resources to address those gaps; and training key staff (NCCs, Information Managers, standby partners and GNC partners) in the relevant knowledge and skills required.

Note: The GNC will focus its capacity development efforts on skills most relevant to cluster coordination at the country level. **Where there is a gap in technical guidance or technical capacity, the GNC-CT will share details of existing resources and mechanisms and will advocate for partners with this capacity to fill and/or address these gaps.**

OBJECTIVE:

The objective of this pillar is:

- 1) To strengthen nutrition sector and cluster coordination mechanisms to ensure effective nutrition coordination functions are available at country level.

EXPECTED RESULTS

- NCCs, IMOs and standby partners working in these capacities have the required skills, competencies and tools to deliver on their responsibilities.
- NCCs, IMOs and standby partners working in these capacities have completed the necessary training on coordination functions and have the skills and knowledge to train partners in the same.
- IMOs are trained in the use of the tools and are supported in developing, collating and sharing routine and other relevant information.
- GNC partners are aware of the cluster approach and are building capacity of their country level staff to support harmonized nutrition response in emergencies.
- Coordination capacities and systems in agreed priority countries are enhanced to deliver a coordinated response.

PRIORITY ACTIVITIES

- Develop **comprehensive competency framework** to share with standby partners.
- Assess IMOs/NCCs in countries against the competency framework and identify gaps and mechanisms to fill these gaps.
- Develop a **capacity development strategy** for the GNC.
- Continue to **roll out the updated (Transformative Agenda) cluster coordination trainings** at regional and in-country levels for NCCs and partners.
- Annually **prioritize a list of countries** to strengthen cluster coordination.

- Develop **induction/orientation package** for NCCs, IMOs and standby partners
- **Translate Handbook** into French (and other languages if needed)
- Conduct **review of cluster transition plans/processes** and identify and address capacity gaps
- **Host and update the Nutrition in Emergencies HTP training package**
- **Provide support to 15 cluster countries in organising programme coverage surveys, including conducting of capacity building activities for cluster partners**
- **Regularly update and share with NCCs and GNC partners an existing list of institutions / persons that could be available to GNC and NCCs for technical support**
- Support one day of additional training for the NCC, based on information management toolkit and IMO training package
- Roll out the 5 day training according to the **IM training package**

PILAR 3. OPERATIONAL AND SURGE SUPPORT TO COUNTRY CLUSTERS

This includes support to country clusters to ensure effective coordination functions on the ground through visits and/or the provision of additional staff (i.e. Rapid Response Team (RRT) members or standby partners).

Note: The GNC will focus its support to country clusters on coordination functions. Where there is a gap in The GNC will focus its capacity development efforts on skills most relevant to cluster coordination at the country level. **Where there is a gap in technical guidance or technical capacity, the GNC-CT will share details of existing resources and mechanisms and will advocate for partners with this capacity to fill and/or address these gaps.**

OBJECTIVE:

The objectives of this pillar are:

- 1) To ensure effective, augmented nutrition coordination/IM support for emergency response.
- 2) To enable country cluster staff to access required technical support.

EXPECTED RESULTS

- Increased number of standby partners with capacity in nutrition, coordination and IM³².
- Increased number of CMAM, IYCF and Nutrition Assessment readily available for surge support.
- Increased deployment of individuals to support country clusters at strategic times³³.
- Decreased number of nutrition cluster staffing gaps.
- Continuous funding of the RRT.
- Functional alert system for deteriorating nutrition situations in countries.

PRIORITY ACTIVITIES

OBJECTIVE 1

- Maintain eight to ten Standby Partner (SBP) staff who have the capacity to provide nutrition coordination and IM surge support.
- Deploy trained surge NCC/IMOs to country clusters to fulfil core cluster functions.
- Advocate for and secure funding for RRT function (four NCCs and two IMOs).
- Support country clusters in the development of mid and long-term HR transition plans for cluster coordination/information management from surge.
- Support the Cluster Performance Monitoring exercise at country level where needed.

32. 'capacity in nutrition, coordination and IM' defined as nutritionist, NCCs or IMOs available on their respective rosters

33. See footnote 13

- Establish a system for systematically flagging the countries with potential deterioration of nutrition status
- Conduct evaluation of the RRT.
- Key documents available in English, French and other languages based on demand
- Experiences and learning in nutrition coordination are documented and shared

OBJECTIVE 2

- **Establish surge technical capacity in IYCF-E, Nutrition Assessment and CMAM (2 IYCF-E, 1 NAs and 1 CMAM)**

PILAR 4.

INFORMATION AND KNOWLEDGE MANAGEMENT (IM / KM)

This includes managing appropriate nutritional and coordination information and the capturing, developing, sharing and using relevant knowledge and experiences.

The Nutrition Cluster IM/KM activities will build off of and contribute to the UNICEF-led inter-cluster IM/KM taskforce.

OBJECTIVE:

The objectives of this pillar are:

- 1) To ensure country level clusters have the harmonised tools and guidance required for effective information management.
- 2) To strengthen systems and capacity for documenting and sharing information and knowledge/ learning in effective cluster response at country and global level.

EXPECTED RESULTS

- A toolbox of IM guidance and tools is developed.
- Structures or mechanisms to support and facilitate information exchange among Nutrition Clusters are developed.

PRIORITY ACTIVITIES

OBJECTIVE 1

- Finalise and endorse the GNC IM/KM strategy.
- Develop, review and disseminate GNC IM Toolkit, including guidance on its use.
- Translate IM toolkit into French and Arabic languages .
- Finalise the Nutrition Cluster indicator bank (via NATF Humanitarian Indicator Registry project).
- Develop 5-day IMO training package.

OBJECTIVE 2

- Conduct a scoping exercise among NCCs and IMOs and other IM/KM staff at global and country levels to identify their interest in sharing experiences and learning.
- Support NCCs/IMOs to capture and document their experiences and learning.
- Disseminate captured and documented experiences through multiple channels.
- Develop, launch and maintain an independent website for GNC (in alignment with other clusters).

ANNEX 10.

GNC standard operating procedures and roles of GNC collective

THE GNC COLLECTIVE: UNICEF CLA, GNC-CT AND PARTNERS

The GNC is first and foremost a coordination mechanism. The GNC's **core purpose** is to enable country coordination mechanisms to achieve timely, quality, and appropriate nutrition response to emergencies. The GNC supports country coordination in strategic decision-making, planning and strategy development, advocacy, monitoring and reporting, and contingency planning/preparedness³⁴.

The **vision** of the GNC is to safeguard and improve the nutritional status of emergency affected populations by ensuring an appropriate response that is predictable, timely and effective and at scale.

UNICEF AS CLUSTER LEAD AGENCY

UNICEF is ultimately accountable for ensuring the fulfilment of the CLA responsibilities in the Nutrition Cluster to the Emergency Relief Coordinator. These responsibilities include:

Mainstreaming of the Cluster Approach within UNICEF and promoting understanding of the Cluster Approach within the UNICEF at global, regional and country level.

- Negotiating with other UN Agencies around cluster partnership issues that need to be reflected in global level cluster documentation/ MOUs.
- Advocating at the highest level of the IASC, donors and other concerned bodies the needs and position of the Nutrition Cluster.
- Ensuring that adequate human and financial resources and administrative structure are available.
- Ensuring that there is **technical expertise** and operational support to the Global Cluster Coordination Unit

(a unit comprised of the Global Cluster Coordinators from all of the Clusters and Areas of Responsibility that UNICEF leads- Nutrition, Child Protection and WASH - located in Geneva, Switzerland), including website management and information and knowledge management capacities for the Nutrition clusters at both global and country level.

As the CLA, UNICEF also provides supervisory leadership over the GNC-CT to ensure they adequately steward in the process of contributing to the accomplishment of the GNC annual Work Plan. UNICEF is also responsible to its own programmatic interests and within the GNC these are represented by its nominated participant at global level.

THE GNC-CT

The GNC Coordinator, based within the CLA, is responsible for providing strategic stewardship to the GNC as a whole. The GNC Coordinator is supported by specific staff on a temporary or permanent basis, all considered part of the GNC Coordination Team (GNC-CT).

The GNC-CT provides leadership and stewardship for coordination and functions as the secretariat and leadership for the GNC. The GNC-CT is staffed by UNICEF and housed within UNICEF Geneva.

The GNC-CT represents the GNC partners in global fora and provides operational support to country nutrition clusters while linking stakeholders and ensuring effective communications.

GNC PARTNERS

The GNC partners are entities (organisations, groups or individuals) committed to respecting fundamental humanitarian principles³⁵, working in Nutrition in Emergencies, who are willing to actively help the GNC fulfil its role and who:

- Support the fulfilment of the GNC Strategic Plan by collectively developing and contributing to the GNC Work Plan via funding contribution or in-kind person time (e.g. participation in task forces).
- Are signatories to a Conflict of Interest clause³⁶.
- Support the monitoring of activities in the GNC Work Plan that they are actively contributing towards.

³⁴. As articulated in the Transformative Agenda, the GNC also supports country clusters to coordinate service delivery for nutrition.

³⁵. Including humanity, the humanitarian imperative, impartiality and independence along with the Principles of Partnership (<http://www.globalhumanitarianplatform.org/ghp.html>)

³⁶. See the GNC's Standard Operating Procedures (SOPs) available at www.unicef.org/nutritioncluster

- Contribute to GNC discussions through participation in GNC meetings and teleconferences.
- Support a sense of equality and mutual respect for all other partners.
- Are mutually accountable.

ANNEX 11.

Additional recommendations for the GNC task force on technical role suggested by the reviewers of this report (December 2015)

This table lists comments raised by those who fed into a draft version of this report. They have been documented and included here for consideration by the GNC Task Force on Technical Role.

TOPICS FOR THE TECHNICAL ROLE TASK FORCE TO EXPLORE RAISED DURING THE TECHNICAL ROLE REVIEW PROCESS	
TECHNICAL ROLE DEFINITION AGREEMENT	Do we keep the three areas of technical role (guidance, training, support)? Where does the identification of technical issues that require operation research or guidance fall?
	<i>There is no clear definition for technical role. Technical NiE guidance and technical NiE training are more easily understood than technical NiE support, which is a generic term for responding to ongoing context specific field level requests for technical clarity in the absence of normative guidance, as well help in making existing guidance operational in the emergency context.</i>
	There is no systematic strategy for addressing those two gaps either although they are easily understood.
DEFINE TECHNICAL ROLE AND DEVISE A STRATEGY FOR ADDRESSING EACH COMPONENT	Need a clear strategy on how to address each of the three technical functions and who to link up with to address them?
	This role should be unpacked along the lines of the definition provided in the governance report or expanded to suit the need of the GNC, defined by how the GNC collective need to organized itself around guidance and operational research related issues and operation support to country cluster, which includes covering gaps in technical capacity to scale up NiE programmes and ensure programme quality.
	How would the collective like to address technical capacity gaps, operation research issues and identification of issue that need guidance?
TECHNICAL TRAINING	How is SUN planning to address nutrition technical issues? Is there opportunity to link up with SUN for NiE Capacity Development in countries where SUN is present?
	How do GNC partners see their role in being collectively predictable in addressing operation capacity gap through training, especially in country infiltrated with national NGOs who have limited capacity?
	How would the collective like to address technical capacity gaps, operation research issues and identification of issue that need guidance?

TECHNICAL GUIDANCE	<p>All Key informants were clear that the GNC-CT had no legitimacy to be endorsing guidance (on its own).</p> <p>There are no GNC-Ct endorsed documents, they are all GNC products for example the HTP, MAM decision tree and other IFE document were funded by the GNC/CLA funds but with the collective input and they are labelled as GNC tools. The GNC-CT has never endorsed a tool on its own, even the GNC handbook is a GNC document, not a GNC-CT one. Can only WHO endorse nutritional guidance? Or can the GNC collective agree to endorse guidance like the examples above?</p> <hr/> <p><i>There is a fair level of agreement that the GNC collective has a role to play in equipping country level nutrition actors with technical guidance and technical training to achieve the GNC vision³⁷.</i></p> <p>How about guidance? Any agreement on the GNC role to produce guidance for operational grey zones in NiE?</p>
TECHNICAL SUPPORT	<p>GNC-CT managing a Technical Helpdesk with additional resources to respond to technical support requests. This was done in Somalia, we could probably learn lessons from it.</p>
5 POSSIBLE MODELS FOR RAISING AND ADDRESSING TECHNICAL SUPPORT GAPS AT COUNTRY LEVEL	<p>Does the collective GNC partnership think they have a role in getting together to decision on what operational guidance in support of country clusters?</p> <hr/> <p><i>While <i>Technical guidance</i> and <i>Technical training</i> are more easily understood concepts than <i>Technical support</i>, is the GNC clear how we organize ourselves to deliver on these two first aspects of technical role?</i></p> <hr/> <p>How should the technical gap identified in country be addressed? Is it through training, discussions within the TWG and providing guidance on the how. The report identifies communication channels and we need to identify strategies for responding</p> <hr/> <p>The varied comparative technical advantage of the GNC partnership is not being put to best use to address issues that affect the collective response.</p> <hr/> <p>Is the helpdesk seen to be meeting the needs of country clusters? What are the pros/cons of the helpdesk model?</p>
TWG AND COUNTRY CAPACITY	<p>How to support in country capacity to have functional TWG and support local NGOs in country?</p> <hr/> <p>How do country clusters use the capacity within country cluster partners to fill gaps in capacity, e.g. do the TWG assist the NCC in identifying partners to fill a capacity gap?</p> <hr/> <p>If there are issues regarding the performance of the TWG at country level, what should the GNC partner or the TF do to address this issue?</p> <hr/> <p>Would there is any value in linking TWGS to one-another? i.e. those that are tackling similar technical issues?</p> <hr/> <p>How can we increase capacity for TWG to clearly articulate technical issues more systematically as a key first step to being able to identify appropriate ways of addressing them??</p> <hr/> <p>How can we identify TWG collective technical capacity gaps?</p>
GNC COLLECTIVE CAPACITY	<p>How do we identify and respond to situations where capacity in programme scale up by the collective partnership has been the problem?</p>

³⁷. The vision of the GNC is to safeguard and improve the nutritional status of emergency affected populations by ensuring an appropriate response that is predictable, timely and effective and at scale (2014).

TWO WAY COMMUNICATION FLOWS	<p><i>Figure 1. Current information flows.</i></p> <p>At the moment, there is no agreement on how the three flows need to be finalized, and endorse and applied all the three. Under the technical support, was there any mention on how such a flow should also influence gathering of issues that could constitute into the need for operation research on them?</p>
UPSTREAM COMMUNICATION FLOWS	<p>A major recommendation would be to define clear lines of communication at country-level so that there is a set way to address technical queries at country-level.</p> <hr/> <p>Could the systematic use of the CLA technical capacity in country by even dedicated NCC be worthwhile in countries where CLA capacity is good?</p> <hr/> <p>How do dedicated NCCs approach UNICEF country office nutrition staff for technical inputs to address technical gaps?</p>



Save the Children

