INTER-AGENCY STANDING COMMITTEE

Guidance for Humanitarian Country Teams[1]

Introduction

This guidance note has been developed pursuant to the request made by the IASC Working Group at its 73rd meeting on 18-20 March 2009. It supersedes guidance on developing a broad-based humanitarian country team issued by the Emergency Relief Coordinator to Humanitarian Coordinators on 20 February 2006.[2] It is not meant to be prescriptive, but aims to provide guidance that can be tailored to each country situation, as necessary.

Purpose

The Humanitarian Country Team (HCT), under the leadership of the Humanitarian Coordinator (HC),[3] is the centre-piece of the new humanitarian coordination architecture established by Humanitarian Reform. The HCT is composed of organisations that undertake humanitarian action in-country and that commit to participate in coordination arrangements.[4] Its objective is to ensure that the activities of such organisations are coordinated, and that humanitarian action in-country is principled, timely, effective and efficient, and contributes to longer-term recovery. The overall purpose is to alleviate human suffering and protect the lives, livelihoods and dignity of populations in need.

The HCT is ultimately accountable to the populations in need. Appropriate and meaningful mechanisms should be designed and implemented at the local level to achieve this goal.

The affected State retains the primary role in the initiation, organisation, coordination, and implementation of humanitarian assistance within its territory.[5] Whenever possible, the HCT operates in support of and in coordination with national and local authorities.

GUIDANCE

While the responsibilities, composition and modus operandi of the HCT should be tailored to the specific country situation, the following guidance should be respected:

I   Establishment and disestablishment

1.1   An HCT is established in all countries with an HC position. In countries where there is no HC position, an HCT is established when a humanitarian crisis erupts or a situation of chronic vulnerability sharply deteriorates. An HCT is also established to steer preparedness activities, if no other adequate coordination mechanism exists.

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[1]   Endorsed by the 75th IASC Working Group on 18 November 2009.
[2]   See the IASC document "Update on the Humanitarian Reform Initiatives" (OT/0602/1371/7).
[3]   In the absence of an HC position, the Resident Coordinator (RC). The term "HC" refers to both RC/HCs and stand-alone HCs.
[4]   Humanitarian action includes relief, early recovery and protection activities in the response preparedness and response phases in either disasters or complex emergencies.
[5]   See UN General Assembly Resolution 46/182 of 19 December 1991.

1.2 In countries where there is no HC position, the decision to establish an HCT is taken by the Resident Coordinator (RC), in consultation with relevant operational agencies and the Emergency Relief Coordinator.

1.3 The HCT may be disestablished in the transition phase if and when other coordination mechanisms are considered more effective and appropriate.

1.4 The decision to disestablish the HCT is taken by the HC or, in the absence of an HC position, the RC, in consultation with the HCT and the Emergency Relief Coordinator.

II Responsibilities

The HCT is responsible for:

2.1 Agreeing on common strategic issues related to humanitarian action in-country. This includes setting common objectives and priorities, developing strategic plans,[6] agreeing on the establishment of clusters and the designation of cluster lead agencies,[7] providing guidance to cluster lead agencies, activating resource mobilization mechanisms,[8] and advising the HC on allocation of resources from in-country humanitarian pooled funds, where they exist.

2.2 Agreeing on common policies related to humanitarian action in-country.

2.3 Promoting adherence by organisations that undertake humanitarian action in-country with humanitarian principles,[9] Principles of Partnership,[10] IASC guidelines, and policies and strategies adopted by the HCT.

III Composition

3.1 The HCT is composed of organisations that undertake humanitarian action in-country and that commit to participate in coordination arrangements. These may include UN agencies, the International Organization for Migration, non-governmental organizations,[11] and, subject to their individual mandates, components of the International Red Cross and Red Crescent Movement.[12]

3.2 The size of the HCT is limited, to allow for effective decision-making.[13]

3.3 Membership criteria are clear, generally accepted and well-known. The main criterion is operational relevance.

3.4 Members are represented at the highest level (Country Representative or equivalent).

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[6] E.g. common planning framework for contingency planning, Common Humanitarian Action Plan (CHAP).

[7] This may include designating non-governmental organizations (NGOs) as cluster co-lead agencies/co-chairs/co-facilitators.

[8] E.g. CAP, Flash Appeal, CERF grant applications.

[9] These are humanity, neutrality, impartiality and independence.

[10] These are equality, transparency, result-oriented approach, responsibility, and complementarity. They were endorsed by the Global Humanitarian Platform in July 2007. See www.globalhumanitarianplatform.org

[11] Both national and international NGOs.

[12] Among the components of the International Red Cross and Red Crescent Movement, the ICRC attends Humanitarian Country Team meetings in an observer capacity. It will continue to coordinate with other humanitarian actors to the extent necessary to achieve efficient operational complementarity and a strengthened response for people affected by armed conflict and other situations of violence.

[13] If not all organisations that undertake humanitarian action in-country are included in the HCT, the HC (or, in the absence of an HC position, the RC) is responsible for convening a separate, inclusive forum to ensure periodic interaction among such organisations. Such a forum is chaired by the HC (or, in the absence of an HC position, the RC), and may be co-chaired by a non-UN organisation.

3.5   In addition to their own organisation, members may represent one or more organisations that are not members of the HCT, at their request.

3.6   Representatives of Cluster Lead Agencies represent their cluster(s) in addition to their organisation.

3.7   The Head of the OCHA Office participates in the HCT, and OCHA provides secretariat support to the Team.

3.8   When appropriate, other institutions and agencies may be invited to participate in HCT meetings.

IV   Chairmanship

4.1   The HCT is chaired by the HC or, in the absence of an HC position, by the RC.

V   Modus operandi

5.1   The modus operandi of the HCT is governed by the Principles of Partnership.

5.2   The chairmanship style is consensual and facilitative, and the membership style is collaborative and constructive.

5.3   Meetings are strategic in purpose, focused on clear objectives, action-oriented, and produce reality-based decisions that are followed up.

5.4   The HCT periodically carries out performance reviews to ensure it is achieving its goals and objectives.

VI   Interface with other in-country coordination mechanisms

6.1   The HCT and the UN Country Team coexist and do not replace each-other.[14] The HC or, in the absence of an HC position, the RC is responsible for ensuring complementarity between them.[15]

6.2   Where a UN Disaster Management Team (DMT) exists at Country Representative level, the HC or, in the absence of an HC position, the RC is responsible for avoiding duplication with the HCT.[15]

6.3   Whenever possible the HCT complements government-led coordination structures.

6.4   The HCT interfaces with the UN Security Management Team as appropriate.

6.5   In the transition phase, if the HCT is maintained, the HC or, in the absence of an HC position, the RC is responsible for ensuring complementarity with other coordination mechanisms.

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[14]   On the functioning of the UN Country Team, see the Guidance Note on Resident Coordinator and UN Country Team Working Relations adopted by UNDG on 29 January 2009.

[15]   If the HC is not also the RC, such responsibility befits both the HC and the RC.