ACF INTERNATIONAL
AND THE TRANSFORMATIVE AGENDA
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EXECUTIVE SUMMARY

The Transformative Agenda (TA) is an on-going process launched by the Inter-Agency Standing Committee (IASC) in December 2011 in order to improve the timeliness and effectiveness of international collective humanitarian response. In this way the IASC intended to fix the remaining challenges of the 2005 Humanitarian Reform (HR) which became apparent after some of the failures of collective response to the 2010 Pakistani floods and the Haiti earthquake.

The TA covers issues which fall under three pillars: coordination, leadership and accountability. Those issues are addressed through a number of guidance documents (the “TA Protocols”) and a set of actions aimed at improving collective humanitarian response, yet the TA’s content and scope have not been defined with precision. This lack of clear definition, and seeming non-transparency around the whole TA process, has resulted in inconsistent engagement of the NGO community.

In 2014, the TA is expected to enter a phase of massive roll-out at field level. It is, therefore, urgent for NGOs to understand the role they have to play in the TA if they want to influence this new stage of the humanitarian response coordination transformation.

As an active participant of international humanitarian coordination, ACF has engaged with the HR and is currently assessing opportunities and added value of engaging with the TA. This report is part of this effort. It serves both as a tool which helps to understand the TA contents, structure and state of roll-out and as critical analysis of the TA from an NGO’s standpoint.

The report is based on information obtained from documents released by the IASC, UN agencies and NGO consortia, and on interviews conducted in October-December 2013 with representatives of UN agencies, donors, and the international NGO community and with ACF headquarters and field-based staff. Where possible, ACF shares its own experience with the TA at global and country level.

The first part of the report provides an overview of the TA process since its inception, from development of the TA protocols to the on-going roll-out in the field. It explains what bodies and mechanisms deal with the TA and how NGOs have been engaged with it.

The following chapters look closely at each of the three TA pillars – coordination, leadership and accountability. Key TA elements are identified, followed by an analysis of the state of their roll-out and of their relevance for addressing major challenges of humanitarian coordination. Each time, ACF tries to see in which ways it has been contributing to objectives set under the TA.

ACF comes to the conclusion that while setting the right direction, the TA has not addressed some major structural problems of humanitarian coordination and has left untouched two pillars of the HR, namely the Humanitarian Financing and the Principles of Partnership. The TA roll-out in the field has been taken up slowly and has influenced unevenly across different geographic areas.

It is, therefore too early to talk about a real transformation of the international humanitarian coordination system. Further action needs to be taken to achieve the TA objectives and to eliminate the remaining weaknesses of the HR which have not been addressed by the TA. To support further improvement of the coordination system, this report identifies major shortcomings of the TA and offers recommendations to the IASC, UN agencies, NGOs and donors with a view to ensuring effective collective humanitarian action.
METHODODOLOGY

This report is based on documents issued by the IASC, UN agencies and NGO consortia and on information obtained from ACF field- and headquarters-based personnel and in conversations with external actors.

It is important to note that the IASC has not yet provided a precise definition of the TA and its integral elements. This report represents ACF’s attempt to bring together information available about the TA and analyse it through the prism of its own experience.

INTERNAL SURVEY AND INTERVIEWS

An online survey was conducted among 16 ACF missions¹ in May 2013 to make a preliminary assessment of the major shortcomings of the humanitarian coordination system and of the state of the TA roll-out.

A series of interviews was then carried out in October-beginning of December 2013, with 12 ACF country directors², ACF Regional Representative for the Middle East³, 7 desk officers⁴, two operations directors of the ACF international network, ACF’s representatives in the Global Food Security, Global Logistics Cluster, Global Nutrition Cluster and Global WASH Cluster, a Disaster Risk Management Advisor and the ACF France Director General.

EXTERNAL INTERVIEWS

During the same period, October-early December 2013, ACF discussed the TA roll-out with representatives of UN agencies (FAO, OCHA, UNHCR, UNICEF and WFP), the NGO community (ICVA, InterAction and Oxfam) and a donor (ECHO).

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¹ - Afghanistan, Chad, Colombia, DRC, Ethiopia, Haiti, Ivory Coast, Lebanon, Kenya, Mali, Myanmar, Niger, Pakistan, Palestine, Somalia and South Sudan
² - Afghanistan, Chad, Colombia, DRC, Mali, Myanmar, Niger, Pakistan, Philippines, Somalia, South Sudan and Yemen.
³ - Representing ACF on issues related to its humanitarian response to the Syrian crisis.
⁴ - Responsible for the following countries and territories: Afghanistan, Bangladesh, Bolivia, Burkina Faso, Central African Republic, Chad, Colombia, Djibouti, Ethiopia, Guatemala, Haiti, India, Indonesia, Iraqi Kurdistan Region, Ivory Coast, Jordan, Kenya, Madagascar, Liberia, Mali, Mongolia, Myanmar, Nepal, Nicaragua, Niger, Paraguay, Peru, Philippines, Sierra Leone, Somalia, South Sudan, Uganda and Zimbabwe.
INTRODUCTION

HISTORICAL BACKGROUND: THE HUMANITARIAN REFORM AND THE TRANSFORMATIVE AGENDA

The year 2005 saw the launch of the Humanitarian Reform (HR), a comprehensive reform of the international humanitarian coordination initiated by the Emergency Relief Coordinator (ERC)\(^5\), together with the Inter-Agency Standing Committee (IASC).\(^6\) The HR relied on four pillars:

- Coordination;
- Leadership;
- Humanitarian Financing;
- Principles of Partnership (this pillar was added in 2007).

The HR created the international humanitarian coordination system as it exists today. However, the failure of the humanitarian community to effectively respond to two major natural disasters which happened in 2010, namely the floods in Pakistan and the Haiti earthquake, proved that the coordination system needed further improvement.

To respond to the remaining challenges of the HR, the Transformative Agenda (TA) was agreed in December 2011 by the IASC Principles\(^7\), under the chair of the current UN Emergency Relief Coordinator (ERC) Valerie Amos.

The TA was intended as a set of actions aimed at improving the timeliness and effectiveness of the collective response. The TA is based on three pillars:

- Coordination;
- Leadership;
- Accountability.

The TA is not a new reform but an enhancement which builds upon the HR. It further links with the World Humanitarian Summit, which will take place in 2016.\(^8\)

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\(^5\) The Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, head of the UN Office for the Coordination of Humanitarian Affairs (OCHA).

\(^6\) An inter-agency forum for coordination, policy development and decision-making lead by the ERC and involving UN agencies and NGOs.

\(^7\) Heads of all IASC member agencies or their representatives.

\(^8\) The Summit will build on the TA and will attempt to identify a new business model for a more inclusive humanitarian system.
RATIONALE FOR THE REPORT:
ACF AND THE INTERNATIONAL HUMANITARIAN COORDINATION

ACF is an operational humanitarian non-governmental organization (NGO), which intervenes in more than 45 countries of the world. To best serve the needs of crisis-affected populations, ACF coordinates with other international non-governmental organizations (INGOs) and national non-governmental organizations (NNGOs), UN agencies and governments of affected countries.

Conscious of the importance of coherent coordinated humanitarian response, ACF has actively engaged with the HR framework, reserving the right to limit its participation if the HR enters into conflict with ACF principles and/or the ACF Charter, if the Principles of Partnership are not strictly observed and if the added value of the humanitarian operations in areas where ACF works is not demonstrated.

ACF has actively contributed to the HR by providing critical feedback on HR components and supporting HR-related operational projects. In 2011-2013, ACF led the implementation of the NGOs and Humanitarian Reform Project Phase II (NHRO II) in Ivory Coast, an initiative of the International Council of Voluntary Agencies (ICVA) aimed at strengthening the role of national and international NGOs in coordination in five selected countries. The new developments brought by the TA to the HR-based coordination framework are prompting ACF to re-evaluate its engagement with the international coordination, and this report is part of this effort. It has a double objective to take stock of TA-driven changes and to assess the room for NGOs’ engagement on the basis of ACF’s experience. ACF tries to see if the TA offers the right solutions for improving humanitarian coordination, if the TA is worth the explicit support of the NGO community and if this new reform stage of the TA is sufficiently inclusive of international and national non-governmental actors.

STRUCTURE OF THE REPORT

This report serves both as a practical tool which helps to understand the TA components and as a critical overview of the TA and its implementation.

In order to better assess the capacity of NGOs to engage with the TA at both global and country level, the TA is analysed from two angles: the institutional mechanisms around it and the nature of the enhancements proposed by the TA.

The report is, therefore, divided into two parts. The first part explains what bodies and mechanisms are involved in the TA and how it has evolved, from the development of its normative framework up to its roll-out in the field. The second part of the report examines each of the TA pillars, critically assesses the progress of their implementation and offers examples of ACF’s contribution to objectives set under the TA. The report concludes with recommendations to the IASC, UN agencies, NGOs and donors for an efficient implementation of the TA and achievement of its objectives.

9 - Data for the year 2012.
11 - Somalia, Ivory Coast, Pakistan, Sudan and Zimbabwe.
PART I

HOW IS THE “TRANSFORMATIVE AGENDA” STRUCTURED?

The TA is a complex process, which has involved various actors and resulted in different types of actions. This part of the report looks at the TA process from its inception to roll-out on the ground and attempts to explain what elements form part of the TA and what actors and bodies have been dealing with the TA development and implementation. A specific focus is given to the role of NGOs in the TA.

WHAT IS THE “TRANSFORMATIVE AGENDA”?

The IASC Transformative Agenda is “a set of concrete actions aimed at transforming the way in which the humanitarian community responds to emergencies. It focuses on improving the timeliness and effectiveness of the collective response through stronger leadership, more effective coordination structures, and improved accountability for performance and to affected people”.12

Initially, the TA mainly focused on developing procedures for response to large-scale rapid-onset emergencies (Level3 (L3) emergencies) in order to rectify defaults of humanitarian coordination revealed in response to Pakistani floods and Haiti earthquake in 2010. The TA was subsequently enlarged to cover all types of humanitarian context.

Yet, since its inception, the TA has been repeatedly reformulated, which has resulted in confusion and lack of consensus on its components.

In the narrow sense, the TA stands for a number of policy documents, the so-called “TA protocols”, which have been developed by the IASC to provide guidance on improving collective humanitarian response.

In the broader sense, the TA is understood as an extensive transformational process and a “cultural shift” towards effective and accountable collective humanitarian action.

The Inter-Agency Standing Committee is an inter-agency forum for coordination, policy development and decision-making established by the UN General Assembly resolution 46/182 in 1991. Two years later, in its resolution 48/57, the General Assembly stressed that the IASC should serve as the primary mechanism for inter-agency coordination and act “in an action-oriented manner on policy issues related to humanitarian assistance and on formulating a coherent and timely United Nations response to humanitarian emergencies”.

**MEMBERSHIP**

The IASC brings together representatives of intergovernmental organizations and non-governmental actors which engage with the humanitarian sector. Those include UN agencies and specific mandate holders, the International Organization for Migration, the World Bank, the International Committee of the Red Cross, the International Federation of Red Cross and Red Crescent Societies and three NGO consortia (ICVA, Interaction and the Steering Committee for Humanitarian Response (SCHR)). Some NGOs participate in IASC bodies on an ad hoc basis.

**STRUCTURE**

The IASC is headed by the IASC Principals, executive-level representatives of IASC member organizations, who meet under the chair of the UN Emergency Relief Coordinator and decide on strategic policy decisions and major operational decisions.

Senior-level representatives of IASC organizations participate in the IASC Working Group, which provides policy support to the Principals, and in the IASC Emergency Directors Group, which deals with operational issues. The Working Group is assisted by Subsidiary Bodies, which work on specific policy questions and include Sub-Working Groups, Task Forces and Reference Groups.

The IASC Secretariat assists different IASC bodies and monitors work done by the subsidiary bodies and implementation of IASC decisions.

The IASC is currently reviewing its terms of reference and redefining the role of its bodies and the inter-linkages among them.

**WHAT DOCUMENTS DOES THE TRANSFORMATIVE AGENDA RELY ON?**

The normative basis of the TA are the “TA protocols” - guidance papers developed in 2012-2013 by the IASC to set the parameters for improved collective action in humanitarian emergencies. The protocols support each of the TA’s three pillars – Coordination, Leadership and Accountability.

The TA protocols are conceived as a toolset of guidance, which can be flexibly adapted to the context in each country and should be regularly revised based on feedback from the field and on the results of inter-agency simulation exercises.

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The TA protocols have been developed and adopted by members of the IASC Working Group, the IASC Emergency Directors Group (EDG) and IASC subsidiary bodies, which include representatives of the UN and the NGO community. Donors, which do not have a sit on the IASC, have followed on the protocols development but have not had a direct influence on it.

NGOs mainly engaged with the design of the protocols via three NGO consortia – ICVA, InterAction and SCHR. The consortia encouraged their members to provide feedback on draft protocols and participate in their testing, yet the persistent lack of clarity around the TA resulted in relatively weak and inconsistent engagement of NGOs.

The massive roll-out of the TA protocols on the ground is planned for 2014, though some of their elements are already implemented in different countries. The application of the protocols is supposed to be flexible and context-specific which means that field-based humanitarian actors should have an opportunity to influence the way the protocols will be interpreted and applied in each context.

NGOs should also be able to contribute to future revisions of the TA protocols by providing their feedback to the IASC about relevance of the protocols for field operations. However, no calendar for the revisions has been defined, which may be another factor affecting NGOs’ engagement with the TA in the near and long term.

No more TA protocols will be developed in the future, yet the IASC will continue addressing certain TA-related issue in its normative work.\(^{14}\)

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\(^{14}\) In July 2013, the IASC Working Group determined four priorities that will guide its action for the next two years: accountability to affected people, “reclaiming humanitarianism”, resilience and preparedness, and mobilizing resources. The Transformative Agenda will be a standing item on all agendas of the Working Group through 2014, see InterAction Humanitarian Policy Update on the IASC, August 2013, http://www.interaction.org/sites/default/files/IA%20Humanitarian%20Policy%20Update%20on%20the%20IASC.pdf (last checked on 19 December 2013).
Three consortia participate in the IASC with a “standing invitee” status: ICVA, InterAction and SCHR.

**INTERNATIONAL COUNCIL OF VOLUNTARY AGENCIES (ICVA)** was founded in 1962 and was the first mechanism for international NGO collaboration. ICVA sees its mission in making humanitarian action more principled and effective. It has around 70 members, which include international and national humanitarian NGOs. ICVA’s Secretariat is based in Geneva and other offices operate in New York, Bangkok, Amman and Dakar. ICVA seeks to improve information exchange among its member NGOs, international humanitarian agencies and governments.

**INTERACTION**, based in Washington, DC, unites more than 180 humanitarian and development NGOs and is the largest alliance of US–based international NGOs. InterAction represents NGOs which aim to eliminate extreme poverty, uphold human rights, safeguard a sustainable planet and ensure human dignity for poor and vulnerable populations.

**STEERING COMMITTEE FOR HUMANITARIAN RESPONSE (SCHR)** is a Geneva-based alliance created in 1972. SCHR includes ACT Alliance, Care International, Caritas Internationalis, the International Committee of the Red Cross, the International Federation of Red Cross and Red Crescent Societies, Lutheran World Federation, Oxfam International, Save the Children and World Vision International. The work of SCHR comprises information sharing and coordination among its members and policy work on disaster preparedness, accountability in humanitarian actions and reforming the humanitarian sector.

**WHICH COUNTRIES PILOTED THE TRANSFORMATIVE AGENDA?**

Three IASC inter-agency missions were organized during the development of the TA protocols in order to validate new policies and procedures proposed by the TA and determine their applicability and relevance to different contexts. The TA missions visited **South Sudan in April 2012**, **Chad in September 2012** and **Myanmar in February 2013**. Each mission comprised members of several UN agencies and a representative of the NGO community.

**ACF’S EXPERIENCE**

ACF engaged with two out of the three TA missions mentioned above.

In **South Sudan**, ACF was involved, as a member of the local NGO forum’s steering committee, in gathering and providing a collective feedback of NGOs to the TA mission members. By the time the mission arrived to South Sudan, the majority of the TA elements had already been put in place there and the humanitarian coordination system was particularly efficient compared to other countries. However, ACF operations observed that the mission gave an additional impetus for partnership between UN agencies and NGOs.

In **Chad**, ACF also got engaged with the TA mission and was later involved in the implementation and monitoring of the action plan adopted by the mission. ACF team observed that the action plan helped to improve the decision-making and strategic planning at the HCT level, yet most cluster meetings remained limited to information sharing.

The TA mission to **Myanmar** reportedly focused on assisting the HC and the HCT in applying the Reference Module for Cluster Coordination at the Country Level and the protocols on the Humanitarian Programme Cycle. Unfortunately, ACF team could not engage with this last TA mission for two reasons: at that time, ACF did not yet have a sit on the HCT and was experiencing a staffing gap in the country director’s position. However, in October 2013, ACF’s country director reported that no improvement of leadership, coordination, accountability or cluster performance could be observed.
HOW IS THE TRANSFORMATIVE AGENDA DISSEMINATED AMONG HUMANITARIAN ACTORS?

In order to make the TA-driven transformation towards better collective humanitarian response happen, it is essential to ensure that all humanitarian actors understand what the TA implies and entails for them. However, despite the fact that the TA is entering the phase of massive roll-out on the ground, it is still not known, understood and endorsed by all relevant actors.

DISSEMINATION AMONG UN AGENCIES

UN agencies have been more involved than NGOs in the TA and some of the TA elements are relevant exclusively for them. UN agencies\(^ {16}\) report having integrated the TA into their operations, including their internal emergency response procedures and having given specific instructions to their country representatives. However, each agency has been left free to interpret the TA and decide on the adjustments it should make to its rules and regulations and on the messages it should pass on to its staff.

Representatives of UN agencies interviewed for this report have also indicated that one of the major effects of the TA has been an unprecedented level of discussion among the agencies about their working methods and increased dialogue between the UN and NGOs. ACF confirms that all the UN agencies contacted in preparation for this report readily accepted to discuss the TA implementation. Nevertheless, the TA, which has regrettably not seen an attempt to reinforce respect of the Principles of Partnership, has created no formal mechanism or obligation for UN agencies to improve their dialogue and collaboration with NGOs.

Today, each agency decides on its own if and how it should communicate with NGOs about the TA. Only three implementing UN agencies have taken initiatives to create public forums for dialogue with the NGO community and those forums are not TA-specific but can be used for raising some TA-related issues: 1) the UNHCR Structured Dialogue, which is devoted to the implementation of the Principles of Partnership; 2) the UNICEF consultations, which cover certain TA aspects such as cluster coordination and preparedness; and 3) WFP consultations, one of which has recently been entirely devoted to the TA.

ACF’S EXPERIENCE

ACF participated to the UNICEF consultations in December 2012 and is disappointed to see that the concerns expressed by NGOs have not been acted upon.

The United Nations Office for the Coordination of Humanitarian Affairs (OCHA) has lately demonstrated an increased openness for discussion with NGOs at the global level, particularly on TA issues.\(^ {17}\) Yet it does not have a formal leadership in the TA over the implementing UN agencies.

In this respect, NGOs should also ask themselves if they have been actively looking for an opportunity to engage in constructive dialogue with UN agencies about the improvement of the humanitarian coordination and if they have analysed benefits of such a dialogue.

DISSEMINATION AMONG NGOs

While admitting that NGOs have a responsibility in being proactively engaged and informed about the on-going transformation of the humanitarian coordination system, ACF observes that the IASC’s communication around

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17 - For the first time, in 2013, OCHA invited NGOs, including ACF, to participate in brainstorming on its 5-year strategy in its office in New York. OCHA has also been very eager to discuss with ACF TA content and roll-out, particularly in preparation for this report.
the TA has been rather limited and confused, so that it has been particularly challenging for NGOs to understand what the TA really means and what it entails in practice for their operations. This creates a risk that the TA roll-out will not be sufficiently endorsed by NGO actors, many of whom, particularly national NGOs (NNGOs), may feel that they have no role to play in the process.

The IASC has not foreseen any solution for spreading information about the TA among NGOs, apart from relying on the limited resources of the NGO consortia. OCHA and other UN agencies have made some additional efforts of training and information dissemination, though this has been done without following any uniform strategy on TA dissemination.

**ACF’S EXPERIENCE**

**AT GLOBAL LEVEL**

At global level, ACF has mainly received information about the TA from InterAction and OCHA – ACF attends OCHA’s monthly meetings with NGOs in New York. In June 2013, representatives of OCHA and InterAction were invited by ACF to present the TA to ACF headquarters and mission staff gathered in Barcelona.

Another important source of information about the TA for ACF has been the Global WASH cluster, which regularly conducts discussions on TA implementation. However, other global clusters of which ACF is a member have not given the same importance to the subject. ACF’s representative in the Global Nutrition Cluster recalls having seen a presentation on the TA which contained no explanations on how the TA would change the way the cluster operates or how NGOs could engage with the TA. ACF’s representative in the Global Logistics Cluster says that no TA discussions are taking place in the cluster.

**AT COUNTRY LEVEL**

A survey and interviews conducted with ACF missions for this report revealed poor awareness about the TA at country level, particularly among missions which do not have a sit on the Humanitarian Country Team (HCT). Very few country directors were aware of the existence of the TA protocols and the majority did not understand why and how they should get involved with the TA. Many perceived the TA exclusively as L3 emergency response activation procedures irrelevant to their context. Where coordination, leadership and accountability have improved in the recent years, this was often seen as not having any connection to the TA.

TA trainings and workshops organized in some countries by OCHA and other UN agencies did not necessarily present the TA as a global transformational process requiring active continuous engagement of all actors. For instance, ACF’s Nigerien mission says that a TA training provided by UNIFEF to HCT members was entirely devoted to the L3 activation procedure and contained no information on how NGOs can engage with the general TA process, particularly in a country like Niger less prone to sudden-onset large-scale emergencies.

The audience of these trainings was also very limited and mainly included HCT members. The ACF team in Yemen reports that not only it could not attend a TA training given by OCHA to HCT members because it was not on the HCT, but ACF was also not invited to another training offered to cluster coordinators, despite the fact that it co-chairs the food security cluster in Yemen.

ACF’s experience shows that understanding the TA is particularly hard for NGOs which do not have a seat on the HCT. This raises two crucial questions: if the HCTs are the right bodies to hold the central role in the TA implementation and if NGOs which sit on HCTs channel the information about the TA to the rest of the NGO community. Unless NGO representatives abide by the rules of engagement with HCTs, NGOs may miss out on many opportunities to influence the on-going humanitarian coordination system transformation.

18 - ACF is currently changing its focal point in the Global Food Security Cluster and the former focal point could not be reached for comment.
WHO OVERSEES AND SUPPORTS THE TRANSFORMATIVE AGENDA ROLL-OUT?

Effective oversight and support mechanisms are an essential condition for successful implementation of the TA and its buy-in by all relevant humanitarian actors.

Discussions about appropriate oversight and support mechanisms for the TA are still on-going within the IASC, though it is hard to assess their progress due to particular lack of transparency on this issue. A three-tier mechanism has reportedly emerged, which includes the Emergency Directors Group, a “3+3 group” and a special roster of TA focal points. Additional support for TA implementation is provided by OCHA.

IASC EMERGENCY DIRECTORS GROUP

The IASC Emergency Directors Group (EDG) bears the main responsibility for the TA implementation. The EDG identifies priority countries for the TA roll-out and carries out country missions to oversee and support the TA implementation on the ground. In 2013, the Emergency Directors (EDs) carried out missions to Afghanistan, Central African Republic, Democratic Republic of Congo, Pakistan and Syria.

At least twice a year, the EDG meets a group of ten donors with which it discusses the progress of the TA. NGO consortia and NGOs sitting on the IASC also attend the meeting.

BOX 4. IASC EMERGENCY DIRECTORS GROUP (EDG)

The EDG is the IASC’s operational body which coordinates humanitarian responses in the lead-up to and during emergencies. The EDG includes emergency directors of UN agencies and of six NGOs, two persons nominated by each of the IASC’s NGO consortium.

Membership on the EDG puts an NGO at the forefront of the TA but also requires a considerable investment in time, including participation to many ad hoc meetings, not necessarily TA-related. Discussions are on-going if the EDG is the right body to oversee the TA.

Another crucial question is how transparent and accountable the EDG is and if its NGO members effectively represent the interests of the wider NGO community. Currently, the only possibility for NGOs to directly reach out to the EDG is through the IASC NGO group, which has been created by ICVA to bring together NGOs sitting on the EDG and IASC Working Group and all other NGOs interested in following the IASC policy. This group meets around once per month, however it creates no formal obligation of accountability for the EDG.

ACF’S EXPERIENCE

ACF’s experience shows that reaching out to EDs may be problematic and the added value of their country visits is hard to trace. For instance, during the EDs’ visit to Pakistan, NGOs struggled to put a meeting with them on the EDs’ agenda. When the meeting was finally agreed, it was only open to HCT members, in spite of the existence of an exceptionally strong NGO forum. The ACF team in Pakistan reports that the EDs did not provide any feedback on the action that would follow and no tangible improvements could be observed after their visit. ACF mission in Afghanistan, which does not have a seat on the HCT, reports not even having been aware of the EDs’ visit to the country.

IASC SPECIAL ROSTER OF TA FOCAL POINTS

The creation of a special roster of IASC experts to provide specific advice on the TA implementation to HCTs, under the supervision of the EDG, has been discussed for quite a while but has not yet materialized into any concrete action. The roster will expectedly include both UN agency and NGO members and will not be limited to emergency directors. It remains unclear when the roster will finally be formed, what its mandate will be and if it will be more transparent than the EDG.
IASC 3+3 GROUP
Yet another group has reportedly been formed within the IASC, whose mandate, reporting lines and accountability obligations remain unclear. The so-called “3+3 group” comprises three directors from UN agencies and three directors from NGOs and NGO consortia. In 2014, the group will be going out on country missions to discuss the TA implementation with HCTs, following HCTs’ self-assessments.

ADDITIONAL SUPPORT PROVIDED BY OCHA
OCHA, whose mandate is to ensure effective coordination of humanitarian assistance, is the primary concerned of the TA success. To support the TA roll-out in the field, OCHA is organizing technical support missions, sometimes in partnership with other UN agencies. Those missions can address such issues as needs assessment, strategic planning, monitoring and evaluation under the Humanitarian Program Cycle or HCT effectiveness improvement. The decision on conducting a technical support mission is measured against priorities set by the EDG, though not defined solely by them. NGOs which have specific expertise can also join the technical support missions, through the EDG or NGO consortia.

CONCLUSION
The TA has been, up until now, a rather non-transparent and patchy process, visibly lacking clear communication, consolidation and simultaneous action. UN agencies have been deciding on their own how to translate the TA into their operations, whereas NGOs have not been well informed about the TA’s implications on their work and the ways in which they could engage with the TA.

Two years after its launch, the TA remains obscure and seems to be decided and implemented by a limited number of actors. Unless the IASC takes concrete action to make the TA seem more clear, coherent and inclusive, the TA risks not being supported by a wider humanitarian community, which would undermine the TA’s very objective of improving collective humanitarian action.

This lack of communication and coherence is particularly alarming now that the TA is entering the phase of massive roll-out at field level. In order for the TA to really improve collective response, all humanitarian actors have to endorse it and understand the role they have to play in the TA roll-out.

The collective humanitarian response will not improve unless it is endorsed by all participants of coordination, including UN agencies, INGOs and NNGOs. This is why it is of paramount importance for the IASC to clearly define what the TA comprises, what each stakeholder is expected to do under the TA and who bears the responsibility for its implementation. NGO consortia which participate in the IASC also have an important role to play in demonstrating to NGOs the added value and opportunities that the TA holds for them and in warning against possible risks associated with engagement with the TA or disengagement from it.

19 - The group includes representatives of UNICEF, UNHCR, UNDP, InterAction and NRC. The last NGO representative is yet to be defined.
PART II

HOW DOES THE TRANSFORMATIVE AGENDA IMPROVE HUMANITARIAN RESPONSE?

Three pillars form the foundation of the TA: coordination, leadership and accountability. They are closely interrelated and relevant for both L3- and non-L3 contexts. The following chapters examine the main objectives set under each pillar and actions which are being taken to achieve them. Each chapter is illustrated with examples from ACF’s experience of dealing with the TA.

It has to be noted that the content of each pillar has not been defined with precision and specific TA elements often relate to more than one pillar. The following subdivision is not official and is done exclusively for ease of reading.

Relevant TA protocols are referenced for each identified TA element. The “Key messages” sections are broader and include, in addition to the protocols, information obtained from other TA-related documents produced by IASC members and from interviews with representatives of IASC organizations conducted for this report.

PILLAR 1: COORDINATION

The overarching idea behind the TA is that all implementing humanitarian actors should begin working as a single team, i.e. jointly identify needs, set common priorities of humanitarian response and focus on achieving collective results. As a consequence, humanitarian response should become more rapid, effective and efficient, without unnecessary duplications.

Initially, the TA mainly focused on developing response procedures for rapid-onset large-scale emergencies, in order to eliminate shortcomings of humanitarian coordination revealed in Pakistan and Haiti in 2010. The TA was later extended to cover response to all types of crises and emergencies.

Concretely, this has resulted in development of special guidelines for system-wide response to large-scale L3 emergencies and in creation of the Humanitarian Program Cycle (HPC), which applies to all types of crises and emergencies. Additional attention has been paid to streamlining the cluster system and to improving coordination and coherence of preparedness activities.
HUMANITARIAN PROGRAMME CYCLE (HPC)

Relevant TA protocols
- Reference Module for the Implementation of the Humanitarian Programme Cycle;
- Responding to Level 3 Emergencies: The Humanitarian Programme Cycle.

Key elements of the TA
The HPC is a programme cycle for coordinated humanitarian response in all types of crises and emergencies, which aims to achieve more effective, efficient, predictable and transparent results of the response. The HPC consists of five elements:
- needs assessment and analysis;
- strategic response planning;
- resource mobilization;
- implementation and monitoring;
- operational review and evaluation.

The HPC is not a radically new product but a single process which brings together already existing components of humanitarian response and some new elements developed specifically under the TA, such as the L3 response procedures. Certain elements of the HPC already formed part of the consolidated appeal process (CAP) - the decision to develop the HPC was taken because the CAP was considered by the IASC too “heavy” in an attempt to include all elements of the program cycle.

The HPC highlights the need for emergency response preparedness activities, evidence-based decision making, early definition of humanitarian response objectives and monitoring of the impact of humanitarian action. Coordinated needs assessments should be done with use of the Multi-cluster/sector Initial Rapid Assessment (MIRA) tool in sudden-onset crises and the Humanitarian Needs Overview (HNO) in slow-onset and protracted crises.

The HPC underscores the primary responsibility of authorities of affected countries for bringing assistance to their populations. The international humanitarian actors are encouraged to work with national and local authorities, as well as with humanitarian organizations already present on the ground, NNGOs and affected populations.

State of roll-out
The HPC has never been implemented integrally, yet some of its elements have been used in certain countries and its L3 response procedure was partially applied in response to the typhoon in Philippines in November 2013.

ACF’S EXPERIENCE

Though ACF has noticed some progress in terms of collective identification of needs and strategic planning in certain countries, the majority of operations staff interviewed for this report have seen little tangible improvement in coordination over the past two years; some believe it has even become worse.

Proliferation of tools for needs assessment and planning has brought confusion and uncertainty about their added value. The success of these tools largely varies from country to country and depends, among other things, on the support by the local government and the political situation in the country. For example, the MIRA had hardly been efficient until the response to the typhoon in Philippines in November 2013, which was generally managed at a good level of coordination with strong support of the Philippine government.

In Myanmar, where the HPC implementation received specific support from the IASC TA mission in February 2013, the mission’s recommendation to develop a common strategic framework materialized in a hastened drafting of a national plan based on a poorly managed Humanitarian Needs Overview (HNO).

20 - 12 ACF country directors and 7 desk officers responsible for the following countries and territories: Afghanistan, Bangladesh, Bolivia, Burkina Faso, Central African Republic, Chad, Colombia, Djibouti, Ethiopia, Guatemala, Haiti, India, Indonesia, Iraq, Kurdistan Region, Ivory Coast, Jordan, Kenya, Madagascar, Liberia, Mali, Mongolia, Myanmar, Nepal, Nicaragua, Niger, Paraguay, Peru, Philippines, Sierra Leone, Somalia, South Sudan, Uganda and Zimbabwe.

21 - This is also partly due to the fact that the MIRA is not directly connected to any of the main funding processes like Flash Appeal or the CERF.

22 - Thirteen countries and territories have conducted standalone HNOs: Afghanistan, CAR, Colombia, DRC, Haiti, Myanmar, South Sudan, Sudan, oPt, Pakistan and Yemen, according to the Joint Progress Report on TA Implementation, December 2013.
HOW ACF CONTRIBUTES TO THE HUMANITARIAN PROGRAMME CYCLE

As one of the leading NGOs in terms of HCT representation and a member of the strategic advisory groups of the Nutrition and WASH Global Clusters, ACF is strongly engaged in strategic decision making on humanitarian coordination.

LEVEL 3 HUMANITARIAN SYSTEM-WIDE EMERGENCY ACTIVATION

Relevant TA protocols
- Concept Paper on “Empowered Leadership”;
- Humanitarian System-Wide Emergency Activation: definition and procedures;
- Inter-Agency Rapid Response Mechanism (IARRM);
- Reference Module for Cluster Coordination at the Country Level;
- Reference Module for the Implementation of the Humanitarian Programme Cycle;
- Responding to Level 3 Emergencies: The Humanitarian Programme Cycle;

Key elements of the TA

The system-wide L3 designation takes place when a large-scale emergency potentially affects all sectors of humanitarian response and requires collective action. Such designation triggers the Humanitarian System-Wide Emergency Activation, which means that the entire humanitarian coordination system has to mobilize its resources for a period of up to 3 months.

The system-wide L3 declaration is decided by the ERC, in consultation with IASC Principals, within 48 hours after the beginning of a major sudden-onset humanitarian crisis. The declaration can also be made at later stages of a large-scale emergency, as it was the case for the Syrian crisis. Five evaluation criteria are taken into account to decide on L3 designation: scale, complexity, urgency, capacity and reputational risk.

Each implementing UN agency commits to maintain a roster of senior staff deployable within 72 hours after the system-wide L3 designation. This staff deployment is referred to as the Inter-Agency Rapid Response Mechanism (IARRM). The IARRM personnel assist the HCT in defining and carrying out the humanitarian response. Their primary role is to advise the HCT on using the existing coordination capacity, while the responsibility for cluster activation rests with the RC/HC in consultation with the HCT.

The L3 activation automatically leads to the establishment of an HCT, with the Resident Coordinator (RC) “rehatted” as Humanitarian Coordinator (HC). A Senior/Emergency HC has to be deployed within 72 hours and a special L3 HC Pool has been created by OCHA to bring together candidates for the senior HC positions with experience in managing large-scale emergencies. Throughout the initial period of three months, the senior HC has to exercise an “empowered leadership”, which means, among other things, taking decisions on behalf of the HCT when no consensus exists.

In the same lapse of time, within the first 72 hours after the beginning of the L3 emergency, an initial CERF allotment of US$10 million to 20 million has to be made.

On the second day of the L3 emergency, the collective needs assessment begins with the use of the MIRA tool. Within three days into the emergency, the HC and the HCT produce a Strategic Statement, which summarizes

23 - In 2013, ACF was the fourth in the list of international NGOs with the highest recorded HCT representation and had a seat on 40% of the total number of HCTs, according to IASC, Humanitarian Country Teams: Global Membership Analysis, 2013.
24 - As opposed to L3 and similar designations made by individual UN agencies in emergencies which affect sectors under their mandates.
25 - See more on the L3 HC Pool and “empowered leadership” concept in the “Leadership” chapter, page 24.
the context and establishes preliminary objectives. It is followed by the Preliminary Response Plan produced within five to seven days and the final Strategic Response Plan, to be completed at 30 days on the basis of information obtained through the MIRA. The strategic response plan forms the core of the narrative for documents produced under the CAP and Flash Appeals.

**State of roll-out**

There have been two attempts to use the TA L3 system-wide activation procedures, in the Syrian crisis and in Philippines in 2013. Yet none of the two resulted in the full application of the TA procedures, so it may be too early to talk about their added value and impact on the activities of humanitarian NGOs.

**In Syria**, the L3 designation came in March 2013, two years into the crisis. This deprived of sense many TA elements related to rapid response in the first day of an emergency. The response in Syria also revealed that the TA L3 procedures were dependent upon agreement of the government of the affected country and were probably not relevant for highly political crises. Effectively, the Syrian government did not allow the establishment of clusters and for a long time opposed the appointment of a Senior/Emergency HC. The Senior HC arrived to Syria only in September 2013. He was selected from the common HC Pool rather than the special L3 HC Pool because the latter did not contain appropriate candidates for the Syrian context.

**ACF’S EXPERIENCE**

ACF notes a particularly poor level of coordination in the Syrian crisis. The efficiency of coordinated response has been undermined by non-respect of the Principles of Partnership, strong competition among UN agencies and, in particular, the fact that the crisis was defined as a “refugee crisis” and thus “managed” by the UNHCR rather than being viewed as a humanitarian crisis and “managed” by OCHA. The TA has no proposed solution to any of those major issues.

Though some minor improvement in coordination happened in the second half of 2013, it is hard to say if these can be attributed to the March 2013 L3 system-wide activation. Despite the appointment of the Senior Humanitarian Coordinator (HC), ACF has not seen the “empowered leadership” concept applied in practice.

**In the Philippines**, the L3 was declared in November 2013 after the Haiyan typhoon struck the country. The TA L3 procedures proved to be better adapted for this type of sudden-onset natural disaster in a context where the government is supportive of international humanitarian action. The L3 declaration came early into the emergency and the response was organized rapidly with immediate CERF allocation, deployment of the IARRM, establishment of coordination at global, national and sub-national level and implementation of the MIRA.

However, the response in the Philippines did not follow the TA protocols to the letter. The Strategic plan elaboration procedures were not followed and the Deputy HC capable of managing this type of L3 emergency was deployed only two weeks into the emergency and, like in Syria, was selected from the common HC Pool and not from the L3 HC Pool.

It is noteworthy that the success of coordinated response in the Philippines is, at least partly, due to the fact that the government was present at all levels of the response (national, regional and sub-national) and a preparedness support strategy for the Philippines had been elaborated by the Global WASH Cluster before the emergency occurred.26

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26 - The Regional Cluster Advisor (RECA) project.
The humanitarian response in the Philippines demonstrated an improved level of coordination and reactivity. However, ACF’s experience of coordination through the Global Logistics Cluster showed that it cannot yet fully rely on international coordination to provide the trustworthy information necessary for rapid and efficient delivery of aid. For example, ACF received inaccurate information about the date and time of a cargo ship’s departure, which made it lose precious time in the days following the catastrophe.

ACF’s experience

ACF provided rapid humanitarian assistance to victims of the Syrian conflict and of the Haiyan typhoon in the Philippines. Though ACF’s actions were not determined by the new TA L3 procedures, ACF tried to coordinate as much as possible with other actors involved in the responses.

For instance, in order to better coordinate with other humanitarian actors involved in the response in Syria and neighbouring countries, ACF created a position of a “Regional Representative for the Middle East”.

In the Philippines, ACF participated in coordination at all levels, from global clusters up to sub-national clusters. To respond to the disaster in a coordinated manner, ACF deployed a Nutrition Information Management Officer seconded to the Global Nutrition Cluster and a Rapid Relief Team (RRT) member seconded to the Global WASH Cluster – in order coordinate the WASH cluster at sub-national level, under a standby agreement with UNICEF.

How ACF contributes to collective L3 response

ACF’s experience

ACF’s experience demonstrates the importance of coordinating with other humanitarian actors to ensure effective delivery of aid. The ability to provide accurate and timely information is crucial for rapid response. The creation of a regional representative position highlights the importance of having dedicated personnel to coordinate with other actors in the region.

The cluster approach

The cluster approach is a mechanism to improve inter-cluster coordination, focusing on strategic and operational gaps analysis, planning, assessment, and results. The activation of clusters should now be recommended by the RC/HC only when there is a need to complement national mechanisms for sectoral coordination.

The status of clusters should be regularly reviewed to ensure they are being used effectively and that they are not substituting national coordination mechanisms. The Reference Module for Cluster Coordination at the Country Level contains tools for monitoring cluster activation and performance.

Minimum commitments

All local, national, and international organizations within clusters are expected to abide by the Minimum Commitments for Participation in Clusters. This emphasizes the joint responsibility of the Cluster Lead Agency and other key humanitarian actors, including IOM, for ensuring effective and efficient response.

Strengthening the cluster approach

 Relevant TA protocols

The TA specifically addresses the issue of cluster performance, suggesting improving inter-cluster coordination and “refocusing” cluster meetings on strategic and operational gaps analysis, planning, assessment, and results, as opposed to information sharing and fund distribution.

The HC should now only recommend the activation of clusters to address an identified need and to complement national mechanisms for sectoral coordination. The clusters should be temporary solutions, which have to be substituted by national, development-oriented coordination mechanisms as soon as the emergency ends.

The status of clusters has to be regularly reviewed by the RC/HC, the HCT, and the IASC’s EDG. The Reference Module for Cluster Coordination at the Country Level mentions the Cluster Activation Checklist for monitoring progress of cluster activation and implementation after an L3 declaration, and the Coordination Performance Report for more in-depth assessment of the quality of cluster operations in all types of humanitarian response.

27 - Recommendation 26, IASC Transformative Agenda: Chapeau and Compendium of Actions (January 2012).
the Cluster Coordinator, resourcing partners and all cluster participants at the national and sub-national level.\textsuperscript{28}

Co-leadership of clusters by NGOs is considered to be a good practice.\textsuperscript{29}

**State of roll-out**

**ACF’S EXPERIENCE**

The cluster performance monitoring is slowly taking up and ACF has already seen cluster performance assessments done in such countries as Afghanistan, Chad, Mali and Somalia.

Yet, since the launch of the TA, few tangible improvements of cluster performance and inter-cluster coordination have been observed at country level, apart from a few exceptional examples, such as South Sudan\textsuperscript{30} and Yemen.\textsuperscript{31} The efficiency of cluster coordination and the room for NGOs’ leadership with the cluster system continue to be largely affected by the fact that representatives of UN agencies are reluctant to share leadership with NGOs and that cluster leads act in the dual role of UN agencies and donors.

In global clusters, coordination has improved, though only in the Global WASH Cluster\textsuperscript{32} this change is attributed to the TA. Despite the on-going TA, the clusters continue working in siloes and little effort is done to make them connected to each other.

Experience of ACF missions shows that clusters are often put in place without clear exit strategies, which leads to poor coordination, difficulties of handover to the government and confusion about overall planning of activities. When an NGO takes the position of a cluster co-lead it does not always mean that the NGO would share decision-making power with the UN lead.

**HOW ACF CONTRIBUTES TO COLLECTIVE L3 RESPONSE**

At the global level, ACF co-chairs the Strategic Advisory Group (SAG) of the Global Nutrition Cluster and is a member of the SAG of the Global WASH Cluster. It also participates in the Global Agriculture Cluster, the Global Food Security Cluster, the Global Health Cluster and the Global Logistics Cluster ACF provides three Rapid Response Team (RRT) staff members to the Global WASH Cluster and the Global Nutrition Cluster and a Regional Cluster Advisor (RECA) to the Global WASH Cluster.

Through global clusters, ACF became engaged with the TA early into the process. In March 2012, ACF represented NGOs doing WASH activities at the Inter-Cluster Consultative Workshop in Montreux, Switzerland, devoted to implementation of the recommendations arising from the TA. The same month, ACF advocated for the cluster system in the World Water Forum in Marseille and, since then, has been persistently calling for improving mutual accountability of cluster participants and for elimination of siloes among the clusters.

At country level, ACF actively participates in all relevant clusters and sometimes takes the role of a cluster co-lead.

\textsuperscript{28} Reference Module for Cluster Coordination at the Country Level, p. 11.

\textsuperscript{29} There was a suggestion to require NGOs to co-lead clusters at different levels, yet NGO representatives involved in drafting of the TA protocols insisted that NGOs should be willing to share the leadership burden and that co-leadership should not be a replacement for poor leadership of cluster leads.

\textsuperscript{30} The report is based on information obtained from ACF’s South Sudan country director in end of October 2013, i.e. before the outbreak of the ongoing conflict.

\textsuperscript{31} Thus, in South Sudan, ACF operations have noticed increased efforts to improve accountability for use of funds allocated through clusters; access to funding and accountability of INGOs; NGOs’ leadership within the cluster system, and a push for inter-cluster joint assessments. However inter-cluster coordination still does not function well enough. In Yemen, ACF has seen an improved transparency and accountability of clusters for funds use; better inter-cluster coordination, increased involvement of NGOs in clusters, improved work of cluster coordinators and better information sharing between national and sub-national clusters. Nevertheless, in Yemen, too, challenges remain, for instance, as far as relation between clusters and authorities are concerned - this is partly due to the fact that many cluster coordinators do not speak Arabic.

\textsuperscript{32} Among the global clusters of which ACF is a member: Food Security, Logistics, Nutrition, Agriculture, Health and WASH.
COMMON FRAMEWORK FOR PREPAREDNESS

Relevant TA protocols

- Common Framework for Preparedness.

Key elements of the TA

The Common Framework for Preparedness requires all humanitarian and development actors to strengthen national and local capacities for preparedness and to do so in a coherent and coordinated manner. The Common Framework promotes collective needs and capacity assessment, joint development of programmes and plans and their coherent implementation. It also underlines the primary responsibility of states for the well-being of their citizens.

According to the Common Framework, preparedness activities have to rely on application of the human rights-based approach, including through consultation with the affected populations and through relevant laws and policies. The Framework also uses a “comprehensive approach”, which encompasses multi-hazard risk assessment, multi-stakeholder engagement, activities at multiple levels (national, sub-national and local) and in multiple sectors, and multi-year preparedness capacity development programming.

The Common Framework is supposed to contribute to integration of preparedness for response and recovery in national and local disaster risk reduction strategies consistent with the Hyogo Framework for Action 2005-2015 (HFA). The experience of implementing the Common Framework should also help international partners to better contribute to consultations leading to the post-2015 international framework for disaster risk reduction, the Hyogo Framework for Action 2 (HFA2).

State of roll-out

The Common Framework for Preparedness is one of the latest adopted TA protocols. Though it is too early to talk about its implementation, the Framework largely repeats what is already being done under the Hyogo Framework for Action. It does not precise what its added value is and how both frameworks are interrelated.

ACF notes, however, that the Common Framework highlights some important issues, such as a link with the human rights based approach, context-specific development of national and local capacities for preparedness and the “comprehensive approach”. Yet, like the Hyogo Framework, the Common Framework lacks indicators for monitoring and evaluation of its efficiency, linkage with emergency activities and explicit focus on the most vulnerable and marginalized populations.

HOW ACF CONtributes TO PREPAREDNESS ACTIVITIES

ACF is committed to enhancing preparedness in face of climate-related shocks and seasonal hardships at national, local and community level. Its “package” of preparedness interventions includes analysis of context, vulnerability and capacities, which is done in consultation with local communities and in partnership with other international and local NGOs. ACF is also strengthening surveillance and early warning systems and linking early warning and early response mechanisms in countries where it intervenes, in collaboration with governments and NGOs. ACF promotes an integrated and multi-disciplinary approach to the Disaster Risk Management that allows more linkage between emergency response and long-term perspective.

ACF, together with CARE, was at the origins of extending the mandate of clusters to preparedness through the Regional Cluster Advisor (RECA) WASH project, which provides preparedness in all of six UN regions, the region West and Central Africa (WACARO) being managed by ACF.

ACF aligns its disaster risk management strategy with the Hyogo Framework for Action and has participated in identification of priorities for the HFA2.
PILLAR 2: LEADERSHIP

The initial idea behind the Leadership pillar was to vest HCs with an “empowered leadership” in L3 emergencies. The discussions then gradually shifted towards enhancing HCs’ performance in all contexts and ensuring collective leadership of the entire HCT.

LEADERSHIP OF HUMANITARIAN COORDINATORS

Relevant TA protocols

- Concept Paper on “Empowered Leadership”;
- Reference Module for the Implementation of the Humanitarian Programme Cycle;

Key elements of the TA

The conceptualization of the “empowered leadership” of the HC is still an ongoing process. According to TA protocols, the HC has to be vested with an increased authority in L3 emergencies, e.g. be able to take decisions on behalf of the HCT in circumstances where there is no consensus, act as the primary focal point for the operation in dealing with senior government officials, raise HCT member and cluster lead performance issues with headquarters of the relevant organizations, etc.

In addition to the already existing HC Pool, the TA has established the L3 HC Pool, which is a roster of 18 senior officials from six IASC organizations available for deployment within 72 hours of an L3 emergency response for a period of up to three months.

In both L3 and non-L3 contexts, the TA relies on strong leadership of HCs at all stages of the Humanitarian Programme Cycle.

State of roll-out

OCHA is working on improving HCs’ leadership at three levels: 1) individual level, which includes identification of future HCs, their selection and training; 2) management level, i.e. providing acting HCs with support and guidance and 3) institutional level, i.e. creating an environment conducive to the HC’s leadership.

- **Individual level**
  Though the new L3 HC Pool has been the TA’s major innovation in terms of HCs’ selection, in practice the L3 Pool has never functioned – in both Syrian and Philippine L3 emergencies, the L3-capable HCs were deployed from the common HC Pool.
  Today, OCHA is focused on strengthening the HC Pool. The Pool is currently depleted of immediately deployable candidates and OCHA is encouraging NGOs to contribute to strengthening it by identifying new leaders, including from their own staff, and by taking part in the selection of the Pool’s members. However, so far the selected candidates with NGO background have been asked to first fill RC positions before they could take on the HC’s role.
  In addition to that, the recent creation of the Regional Humanitarian Coordinator positions for the Sahel region and for the Syrian crisis is cited as an example of matching leadership models to the needs of the context under the TA.

- **Management level**
  The management level includes support and guidance provided by OCHA offices to acting HCs and appraisals of HCs’ performance. Here again, OCHA is encouraging NGOs to make a contribution by providing feedback on
the HCs’ performance. Concerns voiced by NGOs can be later raised during OCHA’s monthly teleconference calls with each HC. The formal yearly appraisal of HCs’ performance will be done on a yearly basis by the EDG.

• Institutional level
This level has two aspects. On one hand, OCHA is working to improve HCTs’ efficiency and make sure that HCT members are ready to support the HC’s leadership and focus on collective results. On the other hand, OCHA is trying to help HCs to reconcile their different agendas, e.g. humanitarian, developmental, human rights and political agendas.

Here NGOs are expected to contribute by encouraging their country representatives to act as real team players of the international humanitarian coordination, i.e. sharing information about beneficiaries, participating in joint needs assessment and collective planning etc.

ACF’S EXPERIENCE

Interviews conducted with ACF mission heads and desk officers for this report have not revealed any consistent pattern of HC performance improvement over the past two years. The efficiency of HCs is perceived as purely personality-related. In countries where weak HCs have recently been replaced by better candidates, this was not viewed as an effect of the TA.

Furthermore, despite the appearing effort to engage more with NGOs, the UN is continuing to establish integrated missions with double-hatted RCs/HCs or triple-hatted DSRSGs/RCs/HCs who deal with both political and humanitarian agendas. In countries where the integrated missions are put in place ACF is often obliged to distance itself from them in order to preserve the respect of the basic humanitarian principles of independence and impartiality.

LEADERSHIP OF HUMANITARIAN COUNTRY TEAMS

Relevant TA protocols

• Reference Module for the Implementation of the Humanitarian Programme Cycle.

Key elements of the TA
The concept of the HC’s “empowered leadership” is gradually evolving towards collective leadership and accountability of the entire HCT. Focus is thus increasing on managing performance of HCTs, which, together with HCs, play the key role in the HPC implementation.

State of roll-out
Part of the HCT performance management is done by the EDG. Apart from that, OCHA is organizing country visits to administer self-assessments for HCTs, help them identify areas for improvement and support them in the HPC implementation. Today, OCHA is collecting best practices around HCT operations, e.g. HCT composition, terms of reference, meeting management techniques, communication between the HCT and clusters, etc., and invites NGOs to contribute to this process.

ACF’S EXPERIENCE

In recent years, ACF has noticed increased encouragement from OCHA for NGOs to take on more leadership. The effectiveness of HCTs and NGO leadership has been improving in a number of countries. However, like with other TA components, this is not yet a general phenomenon. Many ACF country directors feel that certain decisions discussed in HCTs are predefined by UN agencies’ interests.
ACF InternAtIonAl And the trAnsFormAtIve AgendA

ACF is the fourth biggest NGO in terms of HCT presence and an advocate for stronger role of NGOs in coordination, including NNGOs. In a number of countries, ACF has deliberately taken decision not to stand for HCT election to allow for membership rotation. For example, in South Sudan, it has recently stepped down from the HCT to leave place to new NNGO members.

PILLAR 3: ACCOUNTABILITY

Accountability is the buzzword of the TA. Two aspects are considered: increasing the engagement of affected populations with humanitarian programs and improving collective and mutual accountability of humanitarian actors.

ACCOUNTABILITY TO AFFECTED POPULATIONS

Relevant TA protocols

- Reference Module for Cluster Coordination at the Country Level;
- Reference Module for the Implementation of the Humanitarian Programme Cycle;
- Operational Framework for Accountability to Affected Populations.

Key elements of the TA

The Operational Framework for Accountability to Affected Populations (AAP) provides guidance for individual organizations and coordination mechanisms on improving accountability to beneficiaries at different phases of humanitarian programming. The framework is to be used in conjunction with the IASC Accountability Commitment Analysis Tool, the HAP 2010 Standard in Accountability and Quality Management, as well as with locally developed or tailored tools.

According to the AAP framework, there has to be systematic communication with affected populations throughout all phases of the program cycle. Beneficiaries should participate in needs assessment, project design and monitoring. An opportunity has to be provided for them to register complaints, give feedback and get a response. Accountability should also be included into partnership agreements and into job descriptions, particularly in the terms of reference of cluster coordinators.

The AAP framework specifies that affected populations should not be viewed as a homogeneous group; differences among the beneficiaries have to be acknowledged with respect to sex, gender, ethnicity, disability, age, and other social markers of exclusion.

State of roll-out

The Operational Framework for AAP is expected to be field-tested through 2014. This will inform its future revisions, including the incorporation of lessons arising from an on-going project Protection against Sexual Exploitation and Abuse on inter-agency community-based complaints mechanisms.\(^{37}\)

ACF’S EXPERIENCE

Accountability to affected populations is the only TA element in which ACF has observed no improvement over the past two years. The situation is particularly dramatic in certain countries with politically sensitive context where UN representatives may sometimes tend to privilege maintaining good relations with the government, to the detriment of populations in need of assistance.

ACF’s Accountability to Affected Populations

ACF works closely with affected populations throughout evaluation of humanitarian needs and design and implementation of its programs. ACF regularly collects feedback from beneficiaries to know if its operations correspond to populations’ needs and if the manner in which the aid is delivered is considered honest and respectful. ACF gives special consideration to the cultural and social background of beneficiaries and pursues a gender-sensitive policy.

Today, ACF is increasingly implementing feedback mechanisms on the ground. In the Philippines, ACF’s electronic feedback system which provides a response within 24 hours was taken by WFP as an example to develop its own feedback system.

Currently, the ACF US headquarters is developing a unified practical guidance on accountability to communities, which will help ACF’s field missions to design programming better adapted to local contexts.

Accountability for Collective Results and Mutual Accountability

Relevant TA protocols


Key elements of the TA

Apart from improving accountability to beneficiaries, the TA calls for improving collective accountability of humanitarian actors to national authorities, donors and the general public as well as mutual accountability among participants of humanitarian coordination (accountability of the HC, HCT members, cluster coordinators and other cluster participants).

The Reference Module for the Implementation of the HPC suggests conducting continuous humanitarian response monitoring with regular monitoring reports and measuring the progress against the objectives of the Strategic Response Plan. An Operational Peer Review can be demanded by the HC and HCT and is mandatory for L3 emergencies. At least once every four years, all international humanitarian responses should conduct an Inter-Agency Humanitarian Evaluation.

State of roll-out

According to the last Joint Progress Report on TA implementation (December 2013), so far, the central effort in enhancing systemic accountability for collective results has consisted in the modification of the CAP process and in reinforcement of the emphasis on the joint assessment and analysis of needs.

As far as the evaluation of effectiveness of humanitarian response is concerned, the first Operational Peer Review should be conducted in January 2014 to assess the L3 response in Philippines. However, no common indicators have been developed to measure the TA-driven improvement of the humanitarian response.

More importantly, while the TA is calling for better collective and mutual accountability, it does nothing to improve accountability of individual organizations, e.g. accountability for funds use and for cost efficiency of operations carried out by each participant to the humanitarian coordination.

ACF’s Experience

ACF notes that mutual accountability within the international humanitarian community is largely hampered by the non-respect of the Principles of Partnership by UN agencies.

38 - The CAP is integrally linked to the HPC, see page 21.
39 - Ibid.
ACF’s Accountability to Humanitarian Community

Transparency to partners and donors (as well as beneficiaries) is one of the principles of ACF’s Charter. ACF keeps other members of humanitarian coordination informed about its response capacities and respects the commitments it takes before its partners. To reinforce its accountability, ACF participates in the Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP) and publishes evaluations of its activities on the ALNAP website as well as its own channels. ACF would expect a similar level of transparency and respect of their commitments from other humanitarian actors.

Missing Pillars: Humanitarian Financing and Principles of Partnership

ACF regrets that the TA has not sought to address two pillars of the HR whose functioning is of the highest concern for NGOs – Humanitarian Financing and the Principles of Partnership.

As far as these two important HR pillars are concerned, the only activities done under the TA have been the creation of the new procedure for CERF allocation within 72 hours in L3 emergencies and a vague call for humanitarian actors to better work together.

These minor steps do not remedy the alarming imbalance between UN- and non-UN humanitarian actors regarding access to funding. This imbalance of power is, in turn, conducive to disregard of the Principles of Partnership.

The underlying inequalities among humanitarian actors and the lack of real partnership are the major reasons behind the failure of efficient collective response and of NGOs’ poor engagement with the on-going process of international coordination transformation. NNGOs are particularly prone to feeling that they are not concerned by the HR and the TA, as ACF could witness while it was implementing the ICVA’s NGOs and Humanitarian Reform Project Phase II (NHRO II) in Ivory Coast in 2011-2013. ACF hopes that other initiatives will follow after the TA to address the remaining weaknesses of the HR, particularly the two above mentioned HR pillars.

Conclusion

The TA has rightly identified many actual defaults of the humanitarian response coordination. However, the practical solutions proposed by the TA have not always been bold enough to challenge the way the coordination system is organized and to address its major underlying structural problems, such as persisting inequalities between UN- and non-UN humanitarian actors and competition among agencies within the UN system. Those problems are inherent to two remaining pillars of the HR which have not been addressed by the TA – Humanitarian Financing and the Principles of Partnership. The fact that the TA does nothing to rectify those underlying challenges can be an important factor discouraging both INGOs and NNGOs from involvement with the TA and with subsequent stages of humanitarian coordination transformation.

According to the experience of ACF missions, the TA roll-out on the ground has seen slow take up since the TA launch in December 2011. Today, the TA’s outreach and success varies greatly in different geographical areas. Some TA elements have already proved not to be adapted to real-life contexts, such as L3 activation procedure in a politically tense environment like in the Syrian crisis.

Though ACF’s formal engagement with the TA has been limited, ACF has contributed to each of the TA pillars through its active engagement with the humanitarian coordination and its humanitarian programs. ACF is strongly concerned with improving effectiveness and efficiency of humanitarian response and will remain committed to continue enhancing the humanitarian coordination system, as long as this does not prejudice its independence and capacity to serve the needs of affected populations in the most rapid, effective and efficient manner.

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40 - ACF has long been advocating for making the CERF disbursement more rapid in all circumstances.
41 - An additional impact of the TA on humanitarian financing will reportedly be the HC’s veto power over the priorities set for country-based pooled funds’ allocations as part of the HC’s “empowered leadership” concept.
CONCLUSION:
WILL THE TRANSFORMATION HAPPEN?

Evidence on the ground suggests that today’s international humanitarian coordination system created by the Humanitarian Reform is marred by serious shortcomings and that the Transformative Agenda has come at the right moment. ACF confirms that all the three pillars of the TA – coordination, leadership and accountability – reflect serious shortcomings of the HR-based coordination system and require attention.

Yet, however laudable the TA’s objectives are, the scope of changes proposed by the TA and its outreach two years after its launch suggest that it is not living up to the expectations of real transformation.

Several factors are putting at risk the achievement of the final goal of the TA: the transition towards more timely, effective and accountable collective humanitarian response. Here are some of them:

LACK OF TRANSPARENCY
Absence of clarity around the TA definition, the structures dealing with its implementation and opportunities for involvement with it creates confusion and affects the engagement with the TA of the NGO community at large.

THE TA DOES NOT CHALLENGE THE EXISTING COORDINATION SYSTEM
The TA has not attempted to look critically at the structure and composition of the current humanitarian coordination system. Instead, it suggests adjusting the system which is already in place, with all its imperfections.
THE TA DOES NOT ADDRESS TWO PILLARS OF THE HUMANITARIAN REFORM: HUMANITARIAN FINANCING AND PRINCIPLES OF PARTNERSHIP

Though the TA aims to fix the remaining challenges of the HR, it has practically left untouched two weak (yet essential for NGOs) pillars of the HR: Humanitarian Financing and Principles of Partnership. Today, NGOs, which deliver the bulk of international humanitarian assistance, are not treated as equal partners by UN agencies and do not benefit from the same conditions of access to funds.

NO INDICATORS EXIST FOR MEASURING THE TA SUCCESS

No common indicators have been agreed for assessing the TA-driven improvement of the humanitarian response, which makes it impossible to monitor and assess the added value of the TA.

TRANSFORMATION IS POSSIBLE ONLY IF NGOS ARE FULLY PART OF IT

Knowingly or not, all NGOs which participate in humanitarian coordination are affected by the TA. What remains to be known is whether NGOs will be able to effectively influence the TA roll-out and whether the TA would really improve their ability to respond to identified humanitarian needs.

Today, NGOs struggle to understand the TA and fully take up their place in it. The IASC does not communicate sufficiently on the ways in which members of local and international NGO communities can and should engage with the TA. If effective engagement requires additional investment from NGOs, which already work under highly constrained budgets, added value of such investment has to be demonstrated and necessary resources have to be made accessible for NGOs willing to get involved. Otherwise, the TA risks being a purely UN-driven process, which, at the end of the day, only aims to fix defaults of the coordination system created by the UN.

As experts with both UN- and NGO background interviewed for this report point out, real transformation towards better collective humanitarian response will not be possible unless all humanitarian actors go through a "cultural shift", i.e. step away from seeking high-profile visibility and competing for funds, and focus instead on how to best serve needs of affected populations through collective response. In order to encourage this cultural shift, the TA has to become much more transparent and engaging for all humanitarian actors. Unfortunately, in practice, the TA has not yet done anything to eliminate the competition, not even among different agencies within the UN system.

ACF supports the TA’s objective of improving collective humanitarian response and will continue contributing to it through participation in humanitarian coordination. However, it remains to be proven if additional investment in the TA beyond its current substantial investment in the coordination system would allow a humanitarian NGO like ACF to improve its capacity to respond to humanitarian needs of affected populations and if such investment would not unjustifiably deflect its focus from concrete humanitarian action.
RECOMMENDATIONS

TO THE IASC

1) Provide more clarity on TA definition, TA content and accountability lines for the TA roll-out;
2) Specify in which ways NNGOs and INGOs can and should engage with the TA, what benefits this engagement implies and what investment is required;
3) Ensure coherent TA implementation by all IASC members and hold them accountable for respecting objectives set under the TA;
4) Define clear indicators for measuring TA success and develop regular, uniform public reporting on TA progress;
5) Continue normative work to address the remaining challenges of the Humanitarian Reform, i.e. strengthen the respect of the Principles of Partnership and improve the Humanitarian Financing system through ensuring rapid, equal and easy access to funds for all humanitarian actors and making individual organizations accountable for quality and cost-efficiency of their operations.

TO UN AGENCIES

1) Be accountable for compliance with objectives set under the TA and open for a constructive public dialogue with the NGO community about the TA implementation;
2) Share the information necessary for efficient coordinated humanitarian action in a timely and transparent manner and be accountable for effectiveness and efficiency of humanitarian programs implemented by UN agencies and their partners;
3) Share leadership with NGOs and abide by the Principles of Partnership in order to ensure effective collective action, at global and country level;
4) Ensure that both national and international NGO partners can easily access funding for humanitarian operations without unnecessary bureaucratic hurdles and provide sufficient funding for NGOs to cover coordination support costs;
5) Decrease mandate duplications and competition among agencies within the UN system.

TO NGOS

1) Stay informed about the TA and ensure headquarters and field staff understands the role they have to play in it;
2) Formulate and promote joint NGO positions on key elements of the TA;
3) Use membership on global and country-level coordination mechanisms and in NGO consortia to effectively represent the interests of the NGO community influence the TA implementation;
4) Share information on TA implementation obtained in these forums with other members of the NGO community;
5) Transparently share with other humanitarian actors information about identified humanitarian needs and capacity to respond to them;
6) Participate in joint needs assessments and joint planning of humanitarian operations and take into consideration collectively set priorities of humanitarian action;

7) Hold humanitarian partners accountable for delivery on TA objectives and for effective and efficient coverage of humanitarian needs.

**TO DONORS**

1) Monitor the effectiveness and cost-efficiency of humanitarian operations conducted by all humanitarian actors and make decisions on funds allocation based on the results of this analysis;

2) Require from humanitarian actors real steps to improving accountability to affected populations;

3) Provide funds for NGOs to be able to exercise leadership in humanitarian coordination at global and country level;

4) Respect the principles of Good Humanitarian Donorship.
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