

**Annex 3**

**IASC INTERIM SELF-ASSESSMENT  
CLUSTER APPROACH IN ROLL-OUT COUNTRIES  
Workshop Report  
LIBERIA  
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Attendance: HC  
INGOs, the Management Steering Group of INGOs  
National NGOs  
Government of Liberia (Ministry of Agriculture, Ministry of Health, Liberia Reconstruction and Development Commission)  
Donors (ECHO, OFDA)  
Cluster Leads  
ICRC

## **1. INTRODUCTION**

### **1.1 Country Context**

- i. It was decided to adopt the Cluster Approach in Liberia in November 2005 by the UN Country Team, in order to improve predictability, accountability, effectiveness of and partnerships of humanitarian action. By February 2006 an Inter-agency Standing Country Team had been established to ensure participation in and to oversee the implementation of the approach. Individual Clusters developed terms of references and action plans throughout 2006.
- ii. There are a number of characteristics that may differentiate Liberia from other Cluster Approach pilot countries. Liberia is a country in transition from relief to recovery, though it is recognised there will still be pockets of significant humanitarian needs across Liberia for some time to come. Contingent on regional political developments humanitarian needs may also re-emerge. This is seen, by some, as testing the role of the Cluster Approach as a concept designed to improve the effectiveness (and efficiency) of emergency response, as it has been introduced at the final stage of an emergency.
- iii. A new Government was for the first time elected towards the end of 2005 through a transparent and fully democratic process, being inaugurated in January 2006. Moreover, there is no UN OCHA to support the Cluster Approach process in Liberia. The humanitarian coordination function has been subsumed into the United Nations Mission in Liberia (UNMIL). These factors have caused the relevance of choosing Liberia as a Cluster roll-out country to be questioned by some stakeholders at the country level.
- iv. The issue of 'humanitarian space' has been raised by several humanitarian actors given the integration of humanitarian coordination in the UN Mission in Liberia and some NGO Cluster partners feel this may have a bearing on the Cluster Approach in the country.
- v. The Cluster Approach was overlaid onto an existing and partially functional sectoral and area-based coordination mechanism without much understanding of how best to adapt the approach to existing systems or how to extend it to the county level, though there was an understanding that the approach was intended to enhance rather than supplant existing mechanisms.
- vi. Consideration continues to be given to how best to fit Clusters with – and provide support to - increasingly functioning Government structures and strategies as these are coming into place, such as the Government's Interim Poverty Reduction Strategy (IPRSP) and the Liberia Reconstruction and Development Committee (LRDC).
- vii. Awareness of how to bring about the Cluster Approach, and the implications and benefits offered by the approach were initially low. This stemmed from what is perceived to have been inadequate preparedness and proactive promotion of guidelines on the part of the IASC and UN OCHA. Initial confusion led to a certain scepticism about what the added value would be in a post-emergency, transitional scenario. As a result, buy-in was initially weak and participation was often limited.
- viii. The transition of the Humanitarian Information Centre (HIC) into the National Information Management Centre. (NIMAC), reflecting a shift from relief to recovery and concomitantly a greater emphasis on building Government's information management capacity, means that there is no longer a structure solely devoted to provide information for humanitarian planning and response.

- ix. Given poor capacity and sometimes unclear structures, the question of when and where Government assumes leadership of Clusters remains unclear. There is, for example, no singular Government Ministry or institution dealing with water and sanitation issues.
- x. Initially there was an information gap between global Cluster Leads, UNOCHA and the IASC and the country level. This meant that organisations acquired information through other channels. Though there has been great improvement, there needs to be continued focus on active communication, not only within Clusters, but also within the UN system – with the OCHA-Humanitarian Reform Support Unit playing a central role in ensuring that communications are maintained and strengthened.
- xi. The development of the County Support Teams to build capacity for and support Government planning at the county level provides an opportunity for linkage with, and support for, the Clusters at the county level.
- xii. This self-assessment was considered timely and relevant by participants as it can be used as a “spring-board” for participatory transition planning

## 1.2 Workshop Methodology

- i. The workshop was based on the Core Learning Group’s Analytic Framework and outline methodology paper. Accordingly, it looked at achievements and outstanding ‘gaps’ in the overall Cluster Approach as perceived by some fifty participants by Cluster (these are listed at Annex A). Each was presented by a member of the relevant Cluster. This was followed by Focus Group discussions which were then presented in plenary session for additional comment. The four Focus Groups explored the key aspects that underpin the rationale for the Cluster Approach, namely: To what extent has the Cluster Approach
  - o been able to identify and address gaps in humanitarian assistance
  - o helped build partnerships between humanitarian actors
  - o helped improve coordination within and between Clusters
  - o improved accountability

A final plenary discussion was then held on aspects of the Cluster Approach peculiar to Liberia in the context of the UN Integrated Mission, UNMIL, and its application in post-emergency transition.

## 2. OVERVIEW OF KEY OBSERVATIONS

- i. Given that Liberia is the pilot country with the most pronounced transitional stage characteristics, there is a limited knowledge-base on the usage and lessons learned from Clusters in a transitional setting. This has resulted in different interpretations and applications of approaches by individual Cluster Leads. Therefore there is a need to articulate transitional mechanisms - based on country characteristics and needs – through a global and national participatory process.
- ii. The implications of participation, and the value added of this participation, in Clusters remains unclear for some humanitarian actors. As a result, ‘buy-in’ can vary. Consequently there needs to be a clear strategy in terms of ensuring full engagement of partners. National NGOs are inadequately represented in the process.
- iii. Awareness of “the vision” of the Cluster Approach could be enhanced through distribution of user-friendly and relevant country-specific information to all stakeholders at country level. A clear understanding needs to be developed of how the County Support Teams can best link to the Cluster Approach.
- iv. Stakeholder groups should be encouraged to feed into revision and updating of guidelines and Terms of Reference for each Cluster.
- v. The IASC Country Team could consider formal and systematic monitoring of Cluster performance against agreed criteria, and increasing utilisation of the ‘space’ for cross-Cluster dialogue with particular emphasis on integrated planning and inclusion of cross-cutting issues when doing so.
- vi. Development of standardised operating procedures, together with training in ‘strengthening partnerships’, ‘coordination management’ and ‘information management’ for Cluster Leads (i.e those they appoint to act as Coordinators), and key partners - along the lines of CAP training - would be welcomed by the Clusters
- vii. The Cluster Approach as a concept is useful in as much as it provides a more focused forum for engagement of multiple stakeholders. In the transition phase, Clusters can be phased out to become part of the regular coordination and line management function of Government according to a specific timeframe and benchmarks.

## 3. OBSERVATIONS AND RECOMMENDATIONS BY THEMATIC AREA

### 3.1 GENERAL

#### 3.1.1 Added Value to Date

- i. The introduction of Clusters as a reformed approach to leadership and coordination in January 2006, and the establishment of an IASC Country team enabled the UN and its partners to further develop and improve humanitarian coordination in

Liberia. The process is also continues to contribute to the forging of stronger partnerships amongst Ministries of the new Government, the donor community, non-governmental organizations, and the United Nations system.

- ii. Application of the Cluster Approach in Liberia has not been without its challenges. Cluster Leads, more used to managing IDP and refugee re-settlement and implementing long-term national development programmes, initially struggled to meet the expectations associated with the shorter-term humanitarian role demanded by the Cluster Approach. However, a more holistic multi-sectoral approach to the completion of the returns process and ensuring the sustainability of return has been stimulated by the Cluster concept. It has also allowed the mobilisation of CERF funds to meet priority needs in an otherwise uncertain funding environment.

### 3.1.2 Outstanding Issues

- i. Clusters are, by definition, emergency-focused. Those that remain during post-emergency transitions do so to provide an overall planning framework until such time as GOL can take on its responsibilities. This is especially true of the Early Recovery Cluster, where aspects of governance, environment, livelihoods restitution, and the rule-of-law, for example, needs to be mainstreamed in Cluster planning.
- ii. There is a risk of duplication of effort when 'docking' the Cluster Approach onto existing sectoral coordination mechanisms; a duplication which all-too-quickly may result in 'meeting overload' and disengagement. This situation can easily be exacerbated in transitional settings where national and local coordination structures can often parallel the humanitarian coordination architecture set up to respond to the initial crisis.
- iii. Clear Work plans (with indicators) and Terms of Reference need to be put in place by each Cluster in order to ensure a clear understanding of responsibilities within both Government and the aid community. This will also enable the measurement of progress towards pre-determined benchmarks and targets.
- iv. It is difficult to judge the impact of the Cluster Approach if the factors that lead to, or constrain enhanced performance have not been outlined and subjected to cost-benefit analysis. In Liberia there is an absence of such benchmarks.
- v. It was not clear to many participants why Liberia was chosen as a roll-out (pilot) country for the Cluster Approach as: a) OCHA is not present to support its implementation; and b) the emergency phase was largely considered to be over. In the absence of UNOCHA providing support for the Cluster Approach in an integrated mission, it should be considered what the implications and possible additional requirements might be to successfully implement the concept.

### 3.1.3 Recommended Benchmark Activities for 2007

- i. An Early Recovery "network" needs to be established to ensure early engagement in the recovery process across all Clusters. There also needs to be developed a clear understanding of interlinking and interdependent activities across Cluster and what implications they carry.
- ii. Use Liberia as a case-study on the challenges facing integration of Early Recovery into humanitarian and transitional planning.
- iii. Develop and test a 'phase-in and phase-out' strategy for Clusters with timelines, benchmarks, and impact indicators established with national and county structures that are increasingly capacitated for preparedness and response coordination. This with particular reference to the LRDC.

## 3.2 PREDICTABLE GAP-FILLING

### 3.2.1 Added Value to Date

- i. Joint leadership in the Protection and Food Security Clusters, where strong GOL presence and commitment is evident, could be used as a model for identifying and then filling sectoral gaps in other Cluster and Sub-Cluster areas.

### 3.2.2 Outstanding Issues

- i. Predictable gap-filling will be inconsistent if Clusters do not adapt to meeting needs as they evolve, and if models of what worked in similar crises elsewhere are not captured, learned from and applied. At present insufficient experience has been accumulated to provide for learning across the four pilot countries.
- ii. Mechanisms to address cross-cutting issues, inter-dependence, and interlinking needs to be identified through the IASC CT to ensure that these are systematically addressed as an integrated part of any Cluster response.
- iii. Humanitarian funding is decreasing in Liberia and, as so often in the post-emergency transitional phase, remains uncertain and unpredictable. There is a risk of not being able to capitalise on successes to date and, moreover, a premature departure of NGOs and agencies before Government capacities have been fully established. The Health Cluster, in particular, where an estimated 90% of primary health care provision is supported by the non-governmental sector, is likely to suffer from this.
- iv. The filling of gaps demands knowledge of who is doing what where (and when), knowledge of disaggregated needs to the lowest possible level, and a strategic framework to focus prioritization. The proactive follow-up required to maintain WDWV and other mapping services declined with what many participants saw as the premature departure of the Humanitarian Information Centre (HIC).

- v. Embedding Early Recovery issues into Cluster work plans remains a challenge. There was little knowledge of the Early Recovery “Network” concept.

### **3.2.3 Recommended Benchmark Activities for 2007**

- i. Define end-date and milestones for Cluster disengagement or merger against pre-determined criteria that properly reflect objectives against a clearly defined ‘problem statement’.
- ii. Clusters continue to report regularly to the IASC Country Team on their progress against a limited list of prioritized indicators and benchmarks..
- iii. The formal space provided by the IASC CT, needs to be utilised by the Cluster Leads to give regular (quarterly) technical briefings, where inclusion of cross-cutting issues is systematically addressed and challenged by the Country Team collectively.
- iv. The Early Network concept needs to be developed and a clear strategy articulated. Ways of embedding the Early Recovery Cluster in all other Clusters should be identified to ensure that Early Recovery considerations are adequately reflected.
- v. Inclusion of all stakeholder groups, particularly the national NGOs, should be actively promoted by the IASC Country Team and their advice sought in the setting of priorities.
- vi. A checklist of ‘standard operating procedures’ to be used by Clusters would be helpful. An example would be monitoring of attendance at coordination meetings.
- vii. The present positive attention of Liberia around the world provides an opportunity for the Government and its’ humanitarian partners to leverage additional resources by clearly articulating its humanitarian and transitional needs.

## **3.3 PARTNERSHIPS**

### **3.3.1 Added Value to Date**

- i. The Cluster Approach provided a platform for joint assessment of need – albeit using often incompatible methodologies - and planning.

### **3.3.2 Outstanding Issues**

- i. Relationships with identified GOL counterparts at national and local (County) level require strengthening where no Government counterpart has yet been identified.
- ii. Coordination is a management process that requires staff members to be trained in common systems and processes so that the potential for fragmented response is minimised. This will require central and predictable funding through global Cluster Lead mechanisms which eventually should include selected governmental and non-governmental personnel who can be seconded to perform this function.

### **3.3.3 Recommended Benchmark Activities for 2007**

- i. It would be useful if composition of coordination teams, together with standardised operating procedures and Terms of Reference for Cluster coordination functions and stakeholder groups were defined using demonstrated ‘best practices’ from similar transition settings. Lessons learned from within the country could then be assessed together with the three other Cluster roll-out countries in a workshop dedicated to mutual learning.

## **3.4 ACCOUNTABILITY**

### **3.4.1 Added Value to Date**

- i. Clear leadership within certain Clusters (Health, Protection and Food Security - for example) has been perceived as strengthening planning. This is especially the case where Government has the capacity – as opposed to just the willingness – to engage.

### **3.4.2 Outstanding Issues**

- i. The ‘provider of last resort’ stipulation as currently formulated actually acts as a disincentive in many cases as it allows Cluster participants to evade their responsibilities
- ii. There is as yet “no sense of joint responsibility”, with responsibility remaining vested solely in a single agency. Consequently, there is no perceived gain to participation. There is limited understanding of the roles each stakeholder group plays and therefore their responsibilities one to the other. These should be articulated within specific Terms of Reference agreed at country level based on ‘generic’ templates generate by Cluster Leads at the global level.

### **3.4.3 Recommended Benchmark Activities for 2007**

- i. Cluster Leads identify ways to support, including staff, the Government where GOL capacities remain too weak to take on the coordination role.
- ii. Explore the possibility of a global fund be established under the Humanitarian Coordinator for capacitating common services such as (independent) monitoring of Cluster performance, and information management.

- iii. Donors could be requested by the HC to inform Clusters to continue to provide information who they are funding for what, where, and when.

### **3.5 COORDINATION**

#### **3.5.1 Added Value to Date**

- i. Some Clusters (Food Security and Health, for example) have engaged successfully with Government counterparts.

#### **3.5.2 Outstanding Issues**

- i. Merging and phase-out of Clusters should reflect not just outstanding humanitarian needs, but capacities within Government.
- ii. Application of Cluster 'best practice' through dialogue could be replicated by other Clusters.
- iii. Government counterparts need to be identified for those Clusters where no obvious Line Ministry relationship exists, and dialogue fostered with these individuals.
- iv. There is a lack of reporting on, and therefore low awareness of, progress made by Line Ministries and Clusters. There is therefore a need to strengthen information flows through the Clusters.
- v. Consensus management practices can only be enhanced through full and proactive participation by representatives of all stakeholder groups, including donors.
- vi. Exit strategies need to be mainstreamed into 2007 planning, with due regard to contingency planning for worst-case scenarios and building of capacity in partnership with GOL.
- vii. Information Management requires a common platform to be established within a dedicated GOL structure so that consistent statistical analysis can be undertaken for the benefit of all stakeholders.
- viii. The Cluster Approach is not well developed at local (county) level, where it could be adapted to existing coordination structures with the support of the County Support Teams so that systems better reflect application of appropriate national sectoral policies, for example, without over-burdening their already limited capacities.
- ix. The operational functions of coordination are consistently under-resourced. This limits the efficiency and effectiveness of the Cluster approach as it hinders the creation of an 'enabling environment' with which to foster dialogue and facilitation.

#### **3.5.3 Recommended Benchmark Activities for 2007**

- i. IASC CT to articulate what Clusters can do for Government through a collective briefing followed by a series of Cluster-specific briefings, where the Government is not fully participating in the Clusters.
- ii. GOL Cluster counterparts (focal points) to be identified, where the Government is not fully participating in the Clusters.
- iii. GOL to invite WB to participate in Government-chaired Cluster coordination and planning meetings
- iv. National NGOs to be engaged at the IASC Country Team level and their participation strengthened at the Cluster level.



<u>General</u>	
<u>Achievements</u>	<u>Gaps</u>
<u>Very competent and energetic UN Country Team</u>	<u>Lack of clarity and information</u>
<u>Seeing NGOs as more dynamic partners</u>	<u>Sometimes confusion between Sector meetings &amp; Cluster meetings</u>
<u>Works when Country Team is present</u>	<u>Lack of global support and guidance</u>
	<u>Donor buy-in to the system</u>
	<u>What to do about a non-performing cluster</u>
	<u>No clear definition of roles, need for clarification of donor role</u>
	<u>INGOs are irregularly attending</u>
	<u>Competing egos of U.N. agencies</u>
	<u>No timeline for transfer to GoL</u>
	<u>U.N. agencies misunderstand roles and responsibilities</u>
	<u>Awareness?????</u>
	<u>Poor support for local NGOs</u>
	<u>Inadequate manpower</u>
	<u>Lack of proper coordination in terms of meetings</u>
	<u>Emergency coordination three years after the emergency</u>
	<u>Lack of clarification on cluster approach within UNDAF-How does it fit?</u>
	<u>Integrated Mission: does it risk humanitarian space e.g. IASC chair linked to UNMIL</u>
	<u>Different expectations</u>
	<u>Lack of clarity over mechanism to hold agencies/ leads etc. accountable</u>
	<u>Blurring lines between military and humanitarian</u>
	<u>Lack of clarity of purpose</u>
	<u>Coordination exercise or emerging preparedness or both?</u>
	<u>Cluster for humanitarian response or sector development - unclear</u>
	<u>Cluster is Sector or not?</u>
<u>Health</u>	
<u>Achievements</u>	<u>Gaps</u>
<u>Broad participation from stakeholders</u>	<u>Some INGOs not mapping activities or collaborating</u>
<u>MoHSW part of Cluster (but need for further involvement)</u>	<u>Inconsistent participation and involvement of GoL</u>
<u>Issues and problems identified quickly and addressed</u>	<u>GoL/ Cluster Action on HIV/AIDS clumsy</u>
<u>Coordination at central level</u>	<u>Coordination - not decentralized to Counties</u>
<u>Advocacy and appeals</u>	<u>Time-bomb with incentive issue</u>
<u>Gap identification and mapping</u>	<u>Mapping not updated (sites, responsibility)</u>

	<a href="#">M.I.S. data push needs progress</a>
<a href="#">Regular Meetings</a>	<a href="#">Meetings at three levels</a>
<a href="#">Active participation</a>	<a href="#">Bottom-up- approach to need assessment/ gap analysis not apply</a>
<a href="#">Relation between GoL, MoHSW, WHO &amp; NGOs improved</a>	<a href="#">More partners need to be encouraged to participate</a>
<a href="#">Improved co-ordination and dialogue.</a>	<a href="#">Appeal not resulting in funding</a>
<a href="#">Strategy document available</a>	<a href="#">Not functioning at County level</a>
<a href="#">Built on existing coordination mechanisms</a>	<a href="#">Role of UNMIL unclear</a>
	<a href="#">Maternal mortality &amp; mobility rate still high</a>

<b>Food Security</b>	
<b><u>Achievements</u></b>	<b><u>Gaps</u></b>
<a href="#">Bringing all stakeholders together</a>	<a href="#">Some key NGOs are not involved</a>
<a href="#">Developed TOR and policy</a>	<a href="#">Unclear how Cluster fits with other coordination meetings / mechanisms</a>
<a href="#">Platform for identifying priorities</a>	<a href="#">Lack of clarity on roles</a>
<a href="#">Coordination with GOL and stakeholders on CFSNS (first comprehensive data set in the post-crisis situation)</a>	<a href="#">Slow movement on the development of the Food &amp; Nutrition strategy and monitoring mechanism</a>
<a href="#">Effective handling of CERF process in line with GoL's priorities</a>	<a href="#">Needs assessment, analysis and monitoring are fragmented</a>
<a href="#">Good, constructive government leadership with FAO support</a>	<a href="#">In most instances GoL participation is not substantive</a>
<a href="#">GoL participation</a>	<a href="#">Lack of coordination in Counties</a>
<a href="#">Great coordination between stakeholders (if organizations are not participating it is <i>not</i> because opportunity is not there)</a>	<a href="#">Linking to related issues (Nutrition, Early Recovery) unclear</a>
<a href="#">Regular meetings</a>	<a href="#">Few meetings</a>

<b>Protection</b>	
<b><u>Achievements</u></b>	<b><u>Gaps</u></b>
<a href="#">Regular meetings at the national and County level (10 Counties) including sub-Clusters</a>	<a href="#">Too many areas of protection being addressed</a>
<a href="#">Good participation of INGOs and U.N. agencies</a>	<a href="#">More collaboration with local NGOs in the Country needed</a>
<a href="#">Movement toward decentralization in regions</a>	<a href="#">Loss of confidentiality</a>
<a href="#">Shows progress</a>	<a href="#">Little capacity development for sustainable protection</a>
<a href="#">Assimilated protection core group</a>	<a href="#">Need for capacity building and plan for humanitarian response</a>
<a href="#">Referral system established from 10 County groups to national PCG</a>	<a href="#">No referral or reporting mechanisms to date on the national level</a> <a href="#">Struggling in Counties</a>
<a href="#">485 NRC monitors since January reporting protection cases (818 cases referred Jan-June 2006)</a>	<a href="#">Need for increase of the monitoring system</a> <a href="#">Comprehensive analysis of monitoring still lacking</a>

	<u>Need for comprehensive data</u>
<u>Child protection and SGBV sub-Cluster chaired by GOL</u> <u>=&gt; Starting to build the capacity of GoL (Ministries of Gender &amp; Health)</u>	<u>Little GOL engagement with international community efforts</u> <u>No progress with GoL</u> <u>Need to strengthen the coordination with GoL</u>
<u>UNHCR have secretariat</u>	<u>Coordination between sub-Clusters could be developed more, especially with sub-Cluster on Rule of Law under Early Recovery Cluster</u>
<u>It is an active Cluster</u>	<u>Still need improved coordination among existing information management systems on protection</u>
<u>Sub-groups feed in and join advocacy</u>	<u>Link/relationship between PCG/SGBV and ICN on SEA still unclear, although attempt to clarify made earlier in year</u>
<u>Camp closure assessment conducted by inter-agency task force and protection issues identified in 34 closed camps (May 2006)</u>	<u>HIV/Aids not really mainstreamed in Protection Cluster discussions</u>
<u>GBV sub-cluster POA in the final stage</u>	
<u>Number of successful interventions at the County level (following referral of reports by NRC and others)</u>	
<u>Inter-agency trainings in some Counties</u>	
<u>Support from UNMIL HRPS in Counties where Cluster lead is not located</u>	
<u>Dedicated staff within lead agency</u>	
<u>National work plan on child protection, lead CPAs are being encouraged to revitalize County coordination</u>	
<u>Joint monitoring missions</u>	
<u>Support to sub-Cluster lead on issues of orphanages</u>	

<u>Water/Sanitation</u>	
<u>Achievements</u>	<u>Gaps</u>
<u>Established contingency plan for CI</u>	<u>Many different views of expectations</u>
<u>Mapping facilities</u>	<u>Limited or no focus on current problem in Liberia</u>
<u>CERF funding</u>	<u>Need for higher priority on the role and development of information management products and data base</u> <u>○ Follow-through</u> <u>○ Access results</u>
<u>Emergency supplies availability plan established</u>	<u>Who is coordinating?</u> <u>Lack of Government of Liberia involvement</u> <u>No standardized GOL specs wells and latrines</u> <u>The gaps are especially worrisome because the urgent humanitarian needs are great</u> <u>Needs better Cluster leadership</u> <u>Initially only focused on emergency response capacity =&gt; Recovery fell through cracks</u> <u>No "last resort" supply system</u> <u>How do you define emergency preparedness in Liberian context?</u> <u>What happens to regular coordination?</u>

<b>Early Recovery</b>	
<b><u>Achievements</u></b>	<b><u>Gaps</u></b>
<u>Puts the issues on the agenda</u>	<u>Started late</u>
<u>Brings key players together, including the GoL</u>	<u>Definition of Early Recovery in Country context should reflect back on definition of issues dealt with in other clusters</u>
<u>Mapping: "Recycling"/ putting attention back on earlier achievements &amp; data and information products</u>	<u>Weak GoL coordination mechanisms</u>
<u>Network on Legal Assistance now meeting and making link between Protection and Early recovery</u>	<u>Lack of understanding between Early Recovery Cluster and others</u>
	<u>Appealed for CAP funding</u>
	<u>Link with other Clusters unclear</u>
	<u>Early recovery was the RFTF</u>
	<u>Forced to focus only on a few issues leaving out critical issues e.g. governance</u>

<b>Camp Management</b>	
<b><u>Achievements</u></b>	<b><u>Gaps</u></b>
<u>No specific meeting called "Camp Management" meeting, however, activities went on under ICF and PCG (e.g. camp closure assessment, funding of EFA to address environmental gaps)</u>	
<u>Information sharing management</u>	
<u>Set up a common information mechanism</u>	