

Study on the Mapping of Donor Coordination (Humanitarian Aid) at the Field Level

Commissioned by DG ECHO on behalf of Good Humanitarian Donorship initiative

Revised Final Report



2nd July 2009

Contract N°: DG ECHO/ADM/BUD/200X/012XX

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Acknowledgements

The consultants would like to thank all of those who kindly contributed to the research process. The consultants are particularly thankful to those in DG ECHO who found the time to contribute to the analysis and support the team in conducting this study. The team also wishes to express its appreciation to those who hosted it in Nairobi, Kinshasa and Jerusalem.

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List of abbreviations

AECID	Agencia Española de Cooperación Internacional para el Desarrollo
ARF	ASEAN Regional Forum
ASEAN	Association of Southeast Asian Nations
AusAID	Australian Agency for International Development
CAP	Consolidated Appeal Process
CAR	Central African Republic
CHAP	Common Humanitarian Action Plan
CHASE	Conflict, Humanitarian and Security Department (DFID)
CHF	Common Humanitarian Fund
CIDA	Canadian International Development Agency
DANIDA	Danish International Development Agency
DART	Disaster Assistance Response Team (USAID)
DCHA	Bureau for Democracy, Conflict and Humanitarian Assistance (USAID)
DED	<i>Deutscher Entwicklungsdienst</i> (German Development Service)
DG ECHO	European Commission Directorate General for Humanitarian Aid
DFID	Department for International Development (UK)
DRC	Democratic Republic of Congo
DRR	Disaster Risk Reduction
EU	European Union
EC	European Commission
FFP	Food for Peace
GHD	Good Humanitarian Donorship
GTZ	<i>Gesellschaft für Technische Zusammenarbeit</i> (German Technical Cooperation)
HAP	Humanitarian Action Plan (DRC)
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HoO	Head of Office
HQ	Headquarters
HRF	Humanitarian Response Fund

IASC	Inter Agency Standing Committee
ICRC	International Committee of the Red Cross
ICVA	International Council of Voluntary Agencies
IDP	Internally Displaced Person
IFRC	International Federation of the Red Cross and Red Crescent Societies
IOM	International Organization for Migration
NGO	Non Governmental Organisation
LRRD	Linking Relief, Recovery and Development
MONUC	UN Mission in the DRC
OCHA	Office for the Coordination of Humanitarian Affairs
OFDA	Office of U.S. Foreign Disaster Assistance
oPt	occupied Palestinian territories
OTC	Oficina Técnica de Cooperación (Technical Cooperation Office)
PCM	Project Cycle Management
PRM	US State Department's Bureau of Population, Refugees, and Migration
PRRO	Protracted Relief and Recovery Programme
RSO	Regional Support Office (DG ECHO)
SDC	Swiss Agency for Development and Cooperation
SIDA	Swedish International Development Cooperation Agency
SST	Sectoral Support Team (DG ECHO)
TBBC	Thailand Burma Border Consortium
TOR	Terms of Reference
UK	United Kingdom
UN	United Nations
UNETE	United Nations Emergency Technical Team (Colombia)
UNRWA	United Nations Relief and Works Agency for Palestine refugees in the Near East
US	United States
USAID	United States Agency for International Development
VOICE	Voluntary Organisations in Cooperation in Emergencies
WFP	World Food Program

I. Executive Summary

1. Donor (humanitarian) presence and capacity at the field level

1.1 Overview and categorization of donor capacity: Humanitarian donor presence and expertise in the field varies significantly among donors, who can be classified into three broad categories at country and regional levels.

Donors with a comparatively larger humanitarian field capacity (Group 1) have field representatives with humanitarian expertise working full-time and a comparatively large presence in terms of geographical coverage and numbers of staff. This category includes the European Commission (DG ECHO), United States (USAID's Office of Foreign Disaster Assistance - OFDA, Office of Food for Peace - FFP; and the State Department's Bureau of Population, Refugees and Migration - PRM), and the United Kingdom (Department for International Development), even if when compared to the other two donors, the United Kingdom (UK) has a much smaller humanitarian field presence. These three donors also have field staff with regional responsibilities. In the event of sudden-onset emergencies, they are able to rapidly deploy experienced staff to the affected countries from their capitals /headquarters or field offices.

Donors with a limited and mostly part-time humanitarian field capacity (Group 2) rely, for most humanitarian crises, on a part-time capacity. Their field representatives work either for their Foreign Affairs department or their country's development agency. They usually combine the responsibility for humanitarian affairs with a development portfolio or a political task and therefore only dedicate part of their time to humanitarian affairs. The amount of time they dedicate to humanitarian matters varies widely and so does their capacity to take part in coordination frameworks. Bilateral donors occasionally have one or two representatives working full-time on humanitarian issues at the most, except for Australia which has an exceptionally large field presence of six international staff in Indonesia (only). A couple of donors in this group are considering stepping up their field presence in the future, but most said they are unlikely to.

Donors with no humanitarian field capacity (Group 3) are those whose diplomatic presence in the field is so limited that they are not in a position to follow humanitarian matters.

1.2 (Humanitarian) donor presence in crisis countries

At least three donors have a full-time or part-time humanitarian presence in all of the crisis countries with a United Nations (UN) Humanitarian Coordinator (HC) except Somalia. In eight of them, at least 10 donors have a humanitarian presence. DG ECHO has the widest ranging humanitarian presence with full-time humanitarian staff in 40 countries. In 11 countries, one or two donors also have a humanitarian presence **outside the capital** and seven of them do in Afghanistan.

Several donors have **regional offices or humanitarian representatives in embassies with multiple accreditations**. Sometimes country-level donor representatives cover other countries.

Responsibilities and decision-making at the field level: In most cases, funding decisions are taken at capital/headquarters (HQ) level. A few countries have delegated grant making/financial decision-making responsibility for up to 100,000 Euro to the field, whereas in the case of Switzerland and the UK, this delegation of authority is for more than 100,000 Euro. Swiss Development Cooperation (SDC) is undergoing a decentralisation process, while DFID's decision-making is already largely decentralised.

In most cases and to varying degrees, the responsibilities of humanitarian field staff include following, analysing, and reporting on the humanitarian situation, programming, aspects of project cycle management, relations with partners, and representation. For some donors, the information and guidance provided by field representatives are key elements of the decision-making processes at capital/HQ level.

Some donors at capital/HQ level are concerned by the fact that they are not in a position to contrast the information received through the UN system, governments or their NGO partners, and that their representations generally lack the capacity to carry out in-depth analyses. These donors' decision-making is largely based on Consolidated Appeals Process (CAP), Red Cross appeals, information provided by partner organisations, and situation reports, including from DG ECHO. Several EU donors mentioned that the latter are appreciated.

When **sudden-onset disasters** occur, donors of Group 1 and some of Group 2 are able to scale up their response capacities in the field by deploying trained specialists, sending capital/HQ-based staff as surge capacity, or in the case of part-time staff, increasing the amount of time they dedicate to humanitarian affairs.

2. Donor (humanitarian) coordination at the field level

2.1 Responsibility to coordinate with other donor representatives

Most field representatives either have been instructed to coordinate with other donor representatives, know they should, or consider it as normal practice. However, the objectives of coordination are not spelled out in any way.

2.2 Types of coordination mechanisms involving humanitarian donor representatives

2.2.1 UN humanitarian coordination frameworks involving donors

The most frequent humanitarian coordination framework at the country level is the UN-led **IASC/Humanitarian Country Team** forum open to all humanitarian stakeholders. Meetings are convened by OCHA on behalf of the UN HC, are frequent, and tend to focus on information-sharing. Minutes are circulated to participants and others upon request. These meetings are appreciated by donor representatives, especially those with a limited capacity. Depending on their availability and interests, donor representatives also attend **cluster or sector meetings**.

A **formal IASC/HCT humanitarian donor coordination framework** exists in many countries. In general, OCHA convenes the meetings with humanitarian donor representatives on behalf of the UN HC. They typically involve UN agencies, the International Committee of

the Red Cross (ICRC) as an observer, and a number of non-governmental organisations (NGOs) and tend to be information sharing meetings. Their agenda items reflect the particular nature of the participants (donors). Minutes are circulated.

2.2.2 Host government coordination

Government-led mechanisms exist in many countries but their capacities and credibility varies widely. In some contexts, donors encourage governments to take on the responsibility for humanitarian coordination, but in conflict situations involving the government such frameworks are generally not considered useful.

2.2.3 Donor-led humanitarian coordination arrangements

At country level, most donor representatives coordinate **informally**, bilaterally or as a small group, with other donor representatives. Donor representatives with a programming and Project Cycle Management (PCM) role, who share a similar level of expertise and have a good understanding of the reality on the ground, meet more amongst themselves than they do with the others. Consultations and bilateral information exchange, however, take place among a wider group in the margins of meetings and by telephone and email.

Informal meetings tend to be ad hoc and their frequency depends on need, with a sharp increase when a disaster looms or occurs. They are appreciated for their straightforwardness, depth of analysis, operational usefulness, and confidentiality. They are opportunities to exchange information, views, and concerns about a wide range of topics going from operational issues to the capacities of humanitarian actors. They sometimes trigger joint action by the group or by their Heads of Missions. Such meetings do not involve joint planning and programming, but some “alignment” takes place.

Formal donor-only humanitarian coordination mechanisms exist in the **Democratic Republic of Congo (DRC) and Sudan**, both Good Humanitarian Donorship (GHD) pilot countries. Meeting among donors enables them to pool available knowledge and information, to bring up matters of particular interest to them as a group of peers, to contrast views, agree on joint action, and develop common positions if required. These meetings enhance mutual understanding among donors and enable donor representatives with less humanitarian experience to familiarise themselves with humanitarian/GHD principles. They facilitate contact between donor representatives who may otherwise not interact. In DRC, the GHD Group is perceived as enabling donors to play a useful “checks and balances” function. In Sudan, the Humanitarian Donor Group has been instrumental in facilitating coherent diplomatic action.

Examples of **donor led coordination frameworks involving the UN** were found for occupied Palestinian territories (oPt) and for the coordination of assistance for refugees from Myanmar in Thailand.

Country-based recovery and development-oriented donor coordination frameworks seem to exist in almost every context and be led either by Heads of Mission or development cooperation departments. Humanitarian donor representatives seem to have unequal access to them. Nevertheless, there is interaction and coordination between humanitarian donor representatives and their development counterparts. EU Member States have their own

coordination mechanisms, which include regular Heads of Missions meetings and EU Development meetings.

At the **international level**, a case of **good practice was found in Geneva**, where in 2006 donors established a **Donor Contact Group on Chad**, under the leadership of the UK. This initiative stemmed from awareness in Geneva, through information received from the field, that there was a **very limited humanitarian donor presence** in Chad and that **problems inherent to the UN system were preventing a coherent and equitable humanitarian response** to the needs of refugees, Internally Displaced Persons (IDPs), and host populations and. Donor representatives in Geneva decided work together to raise the profile of the problem and was effective in generating the critical mass of thinking necessary to trigger change. The lesson learned from this experience is that **interaction between field-based donor representatives and capital-based ones can make a difference** provided that the objectives are clear and the process is bottom up.

High-level international reconstruction and development-oriented coordination frameworks, generally established in the context of international reconstruction conferences, may have direct links with humanitarian donor representatives at country-level, but no evidence of this was found. Linkages are likely to follow individual, internal donor channels.

2.3 Absence of formal donor coordination and factors encouraging coordination

The main reasons given for the **absence of formal donor coordination arrangements** are that other coordination mechanisms exist, that there is no clear authority to initiate donor coordination or that the UN failed to initiate such coordination. In some contexts, donor representatives seem to find their numbers too low to have formal coordination arrangements and in others, donor representatives do not see what added-value a donor-only meeting would have in addition to informal meetings. Time constraints are also an issue.

Apart from factors such as the quality of meetings, the proximity and amenities at the venue, and character, trust, and language, which affect the commitment to coordinate either way, **factors contributing to donor coordination** include:

- Similar job descriptions, levels of expertise, and a common humanitarian “culture”,
- Similar objectives and operational interests, the need to avoid duplication and ensure as comprehensive as possible a coverage of needs or common operational partners,
- Similar concerns of an ongoing or ad hoc nature,
- Similar coordination objectives,
- Importance attached by capitals/HQ to coordination and perception by the field that it has a margin of manoeuvre to make a difference,
- Perceptions of increased complementarities and leverage as a group (critical mass),
- Complexity of the humanitarian context and/or the challenges of specific constraints on the provision of humanitarian aid.

3. Awareness and putting into practice of GHD principles at the field level

The policies of many donors refer to the GHD principles. Several donors have GHD Domestic Implementation plans or have them in the pipeline. However, most do not refer to the possible role or include any advice for the field for putting GHD into practice. Some guidance has been provided to field staff through trainings and briefings and a few donors have disseminated the Danish Guidance Note for colleagues at country level.

Most field-based humanitarian donor representatives are aware, to varying degrees, of the GHD initiative and principles, but the majority of respondents to the field level survey stated that they lack guidance to implement GHD and no clear instruction to promote GHD implementation among donors. Some of them clarify, however, that GHD principles are mainstreamed in their regular work and part of their global commitment, which is consistent with statements made by several interlocutors to the effect that the principles enshrined in the GHD framework guide their approach, even if they do not refer to them as such. Less than half of them are confident that they know how to put GHD into practice. Several donors in Geneva and the field pointed out that there is **no clarity as to what the 23 principles mean operationally** and according to one of them, guidance would need to be provided for each one of the points. Nevertheless, a majority of capital/HQ level respondents expects their field representatives to play a role in putting GHD into practice.

According to the survey, the **main obstacles** for doing so are staff capacity and time constraints; the fact that some principles cannot be acted upon at the field level; the lack of a plan of achievable action based upon GHD principles; the lack of agreement as to which principles to prioritize; and the lack of leadership among donors.

Nevertheless, the survey revealed that donor representatives are already actively implementing aspects of the GHD framework. In places where donor representatives coordinate, even though GHD principles as such are not explicitly used as a framework for action, there is active interest among them for humanitarian principles, but the study found that putting them into practice is a complex process.

Main recommendations¹

Humanitarian donor presence in the field

Recommendation 1

Donor representatives in the field should attempt to make the most of their collective capacity by pooling expertise, knowledge, and resources to the benefit of the group. The group should envisage systematically sharing information and briefing each other on their field visits, dividing up the burden of attending regular meetings or participating in needs assessments, monitoring project implementation, leading on specific issues, etc.

¹ The corresponding conclusions can be found in the main body of the report.

Recommendation 2

Major donors to a crisis who do not have a full-time presence should consider engaging more actively in the field by deploying a full-time humanitarian expert, at least in a few priority countries. This would improve their own decision-making base and enable them to take part in country-level humanitarian coordination. Complex humanitarian crises with less than three full-time humanitarian experts should be given special consideration for such deployments.

Humanitarian donor coordination in the field

Recommendation 3

IASC/HCT-led coordination mechanisms are one of the generic models recommended for all types of humanitarian situations as the forum for broad-based information-sharing and consultation among humanitarian actors. Donors should ensure that the IASC/HCT includes in its coordination framework a coordination meeting with donors on a regular basis, where the full range of humanitarian issues can be discussed.

Recommendation 4

Humanitarian donor representatives in all field locations, and in particular those where there are only a few donors and a difficult working environment, should step up efforts to coordinate both informally and formally. The “group of three” should systematically link up and act as a driving force for broader-based, regular donor coordination involving all GHD donors supporting the humanitarian response. The establishment of donor-only coordination arrangements should be encouraged by capitals/HQ. One of the tasks of the donor-only forum would be to prepare for the regular meetings with the IASC/HCT.

Recommendation 5

Donors should clarify their expectations as to the objectives of coordination in the field and its limits. Donors with more capacity in the field should look together beyond operational matters into the capacities, tools and methodologies in place and recommend action as required to ensure that the necessary conditions for aid effectiveness exist.

Recommendation 6

Donor coordination frameworks should be adapted to a country’s context. The form and periodicity of meetings should be agreed upon by donor representatives but should not be longer than every two months in order to avoid disconnects and discontinuity.

The chairperson should enjoy support from capital/HQ level to perform with a certain degree of autonomy. A rotational system for the chairperson should be envisaged in the spirit of burden-sharing. As suggested by the Danish guidance note, the calendar of the meetings would need to “coincide with key points in the planning cycle, such as preparation of the CHAP, the launch of the CAP and the mid-term review.” Where appropriate, the allocation of resources to support active donor coordination should be considered.

Recommendation 7

In countries where the number of donor representatives does not enable them to reach a critical mass or where deep-seated problems related to the humanitarian architecture affect the performance of the humanitarian community as a whole, they should consider involving their counterparts at capital/HQ level and Geneva, as long as they have clear and realistic objectives.

Putting GHD into practice at the field level

Recommendation 8

To donor representatives in the field: donor coordination frameworks should identify the GHD principles of greatest relevance to them, examine how they could be put into practice and what stumbling blocks need to be resolved at capital/HQ level. The GHD principles could also be used as a checklist against which to periodically review the context and detect areas in need of improvement.

To donor capitals/HQ: if donor representatives in the field are to play a proactive role in applying GHD principles, donors need to identify which ones can and should be acted upon at the field level and develop guidance for each one of them. Donors should consider establishing a network of field representatives with humanitarian expertise and of capital/HQ staff, willing to engage in identifying the GHD-related issues of most relevance to the field and the most frequent difficulties encountered when putting them into practice.

Recommendation 9

Donors should ensure that guidance for field representatives is developed and made available to them. The GHD website, for example, could be kept updated and used as a repository of all GHD-related information, and linkages to it could be posted on GHD donor websites. In addition, donors should consider providing more training opportunities and appointing GHD focal point(s) who can be contacted for advice by field representatives.

II. Main Report

1. Introduction: Objectives and Methodology

1.1 Objectives of the study

The specific purpose of the study is to “provide a baseline general overview of current donor coordination systems practiced at field level in response to major humanitarian crises” and includes reviewing the emphasis of current donor coordination arrangements and assessing whether they cover the full range of GHD principles. The scope of the study is limited to the capitals of the crisis-affected countries and to crises for which a UN Humanitarian Coordinator (HC) has been designated² and the Cluster Approach introduced.

Further objectives of the study are to:

- Describe in detail examples of good practice on donor coordination and provide an example where donor coordination is inadequate,
- Review the scope of issues covered by donor coordination activities,
- Highlight how field coordination is linked to capital-based donor discussions,
- Outline a few generic models for donor coordination at the field level, based on good practices, and summarize their respective strengths and weaknesses.

The study team was asked to provide conclusions and recommendations at the strategic level.

1.2 Justification for the study

In June 2003, 17 donors committed to the Good Humanitarian Donorship (GHD) initiative, a set of principles, norms and good practice to inform and guide official donorship in the humanitarian arena and a framework for action both individually and collectively. In April 2006, the Development Assistance Committee of the Organisation for Economic Cooperation and Development (OECD) endorsed the principles as the reference for their humanitarian work. Several donors have developed policies based on the GHD framework and a few have outlined their strategies for GHD implementation in a domestic implementation plan.

With the adoption of the European Consensus on Humanitarian Aid by the European Union (EU) in December 2007, the GHD initiative grew to encompass 35 donors. EU Member States, together with the European Commission, now represent 28 of the 35 donors having endorsed the GHD principles. The European Consensus places a strong emphasis on the GHD principles and coordination.

Box 1: European Consensus on Humanitarian Aid

*“Stronger EU co-ordination would enhance the overall international humanitarian response, including **concerted efforts to improve the humanitarian system**” ... “Therefore, without prejudice to their respective competences and traditions, **EU humanitarian donors will work together through strengthened EU coordination and promotion of best practice** with a view to promoting the EU common vision in a flexible and complementary way that reinforces international efforts. This means **that the EU will seek to act in a concerted way to protect the***

² 27 countries: Afghanistan, Burundi, Central African Republic, Chad, Colombia, Côte d’Ivoire, DR Congo, Eritrea, Ethiopia, Georgia, Guinea, Haiti, Indonesia, Iraq, Kenya, Liberia, Myanmar, Nepal, Niger, occupied Palestinian territories, Pakistan, Somalia, Sri Lanka, Sudan, Timor Leste, Uganda, and Zimbabwe.

‘humanitarian space’ and to strengthen the overall humanitarian response, including identifying gaps and supporting well-organised delivery of aid where it is most needed.”... “EU humanitarian donors will endeavour to ensure good donor practice through sharing understanding on need and appropriate responses and through concerted efforts to avoid overlap and to ensure that humanitarian needs are adequately assessed and met. There should be a particular focus on coherence of response strategies to a given crisis, and on working in partnership in the field.

In parallel, a reform of the international humanitarian system has taken place under the leadership of the UN to improve the effectiveness of humanitarian response by ensuring greater predictability, accountability and partnership. Donors strongly supported the development of the capacities required by the humanitarian reform.

Most of the GHD-related efforts have taken place at the global policy level, but relatively little has been done to formally promote donor coordination at the field level. Pilot GHD initiatives were launched in Burundi, the Democratic Republic of Congo, and Sudan, but there appears to be considerable variation in terms of field presence, approaches and levels of engagement. In 2006, GHD members agreed to reinforce collective and individual GHD implementation at field level and in 2008 the Danish government prepared a guidance note for donor representatives in the field and capitals/HQs to promote GHD at the field level, suggesting the steps and factors that will help these donor groups to function well.

GHD donors have agreed upon the need to examine possibilities for further strengthening donor coordination, focussing on added-value at the field level. DG ECHO, with its extensive field presence and as one of the current co-chairs of the GHD with the Netherlands, has committed to leading efforts on mapping existing donor coordination as a basis for taking forward the reflection amongst GHD donors, hence this study.

1.3 Methodology³

The research team used various methods to collect data, which included a review of available documents, online questionnaire surveys, interviews in person and by telephone, and site visits.

Separate **online surveys** were conducted among all 35 GHD donors at capital and HQ level to collect data about their humanitarian presence and capacity at the field level, current field coordination practices and the extent to which GHD principles are used by humanitarian representatives at the field level.

At capital/HQ level, the survey was complemented by visits to four donor capitals (Belgium, Spain, Sweden and the United Kingdom), a visit to Geneva, and telephone interviews with the GHD Focal Points of five non-EU donors (Australia, Canada, Japan, Norway and USA) and of two EU donors for which additional information was needed (France and Germany). At the field level, it was complemented by a visit to Nairobi as a regional hub, Kinshasa (Democratic Republic of Congo) and Jerusalem (for the occupied Palestinian territories) and interviews with selected donors in Colombia, Myanmar and Sudan.

A total of 22 donors replied to the capital/HQ level questionnaire, which represents a response rate of 62%⁴, and 75 field representatives sent responses to the field level questionnaire.⁵ A

³ See annex 10 for details on the methodology.

total of 102 persons were interviewed in person or by telephone. Representatives of 24 donors contributed to the study.⁶

The study collected data on the field presence of the donors, their capacity and expertise, their institutional structure, and the level of decision-making responsibility which they enjoy. The study identified and subsequently mapped donor coordination frameworks (formal and informal) in place in the selected field locations and examined whether they are donor-driven or linked to other field-level coordination mechanisms (e.g. IASC/Humanitarian Country Team) and coordination mechanisms elsewhere (e.g. donor capital, Geneva, etc.). The study collected perceptions of the effectiveness of these coordination mechanisms and identified the advantages and disadvantages of the various frameworks. It looked into whether representatives in the field are aware of the GHD principles and good practices and whether coordination mechanisms cover the full range of GHD principles.

2. Donor (humanitarian) presence and capacity at the field level

2.1 Overview and Categorization of humanitarian donor per type of presence and expertise

Humanitarian donor presence and expertise in the field varies significantly among donors. Donors can be classified into three broad categories at country and regional levels.

2.1.1 Group 1: Donors with a comparatively larger humanitarian field capacity

Donors in this group have field representatives with humanitarian expertise working full-time and a comparatively large field presence in terms of geographical coverage and numbers of staff. These three donors also have field staff with regional responsibilities. In the event of sudden-onset emergencies, they are able to rapidly deploy experienced staff to the affected countries, either from their capitals /headquarters or field offices.

⁴ Australia, Austria, Belgium, Canada, the Czech Republic, Estonia, the European Commission (DG ECHO), Finland, France, Germany, Ireland, Italy, Latvia, Luxemburg, Netherlands, New Zealand, Norway, Spain, Sweden, Switzerland, UK, USA. Two donors sent two replies from the same unit, but after consultation with them, one consolidated version was agreed upon and analysed. Twelve countries sent no replies, namely Bulgaria, Cyprus, Greece, Hungary, Lithuania, Malta, Poland, Portugal, Slovakia, Slovenia, Romania, whereas Denmark submitted its reply in word format after the closure of the online survey and Japan submitted its field presence in word format after the closure of the survey. For technical reasons, the response from Japan and Denmark could not be included in the statistical analysis but were included in the analysis in the text.

⁵ From Australia (6), Austria (2), Belgium (3), DG ECHO (21), France (1), the Netherlands (11), Spain (10), Sweden (13), the UK (6), and the US (2); 50% of the responses came from field representations in Sub-Saharan Africa, about 30% from Asia, 10% from the Middle East, and 8% from the Americas (Colombia and Haiti).

⁶ Donors contributing either in interviews or by filling in the online questionnaire: Austria, Australia, Belgium, Canada, Czech Republic, DG ECHO, Estonia, Finland, France, Germany, Luxemburg, The Netherlands, Japan, Latvia, Ireland, Italy, Norway, New Zealand, Russia, Spain, Sweden, Switzerland, UK, US.

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They are, in decreasing order in terms of numbers:

- EC (DG ECHO),
- US (USAID's Office of Foreign Disaster Assistance and Office of Food for Peace, and State Department's Bureau of Population, Refugees and Migration),
- UK (DFID), but with a distinction: when compared to the EC and the US, the UK has a much smaller humanitarian field presence, but given DFID's decentralised structure, its deployment capacity and the level of expertise of its field staff, the study team believes it should be listed under this category.

Box 2: Overview of donors under group 1

DG ECHO (European Commission Directorate General for Humanitarian Aid) is the service of the European Commission responsible for humanitarian aid. Its mandate is to provide emergency assistance and relief to the victims of natural disasters or armed conflict outside the European Union.

USAID (US Agency for International Development) is a federal government agency advancing U.S. foreign policy objectives by supporting long-term economic growth, agriculture and trade, global health, democracy, conflict prevention, and humanitarian assistance.

OFDA (Office of US Foreign Disaster Assistance) is a USAID office responsible for facilitating and coordinating official US emergency assistance overseas and for providing humanitarian assistance to save lives, alleviate human suffering, and reduce the social and economic impact of natural and man-made disasters worldwide.

Food For Peace is USAID's primary office for donating food quickly to those people who have immediate needs because of natural or man-made disasters. Agricultural goods provided by Food for Peace are also sold or exchanged for rural communities to learn how to produce enough food to meet their own needs, and to teach these communities about nutrition and health.

PRM (Bureau of Population, Refugees, and Migration) is the State Department's Bureau in charge of providing aid and sustainable solutions for refugees, victims of conflict and stateless people worldwide, through repatriation, local integration, and resettlement in the US. PRM also promotes the US population and migration policies.

DFID is the Department for International Development of the government of the UK. It manages Britain's aid to developing countries and works to fight poverty.

2.1.2. Group 2: Donors with a limited and mostly part-time humanitarian field capacity

This group includes (bilateral) donors who in most crises rely on a part-time, limited capacity, such as Australia, Belgium, Canada, France, Italy, Japan, Norway, Spain, Sweden, Germany and The Netherlands. A couple of donors in this group are considering stepping up their field presence in the future, but most said they are unlikely to do so.

Their humanitarian field representatives work for their Foreign Affairs department and are based in embassies (e.g. Germany, The Netherlands, France's network of 25-30 Humanitarian Correspondents, Japan's Economic Assistance Teams). Others work for their country's

development agency (AECID, AUSAID, CIDA, SDC, SIDA)⁷, which may be co-located with their embassy, but not necessarily.

Box 3: Example of Spain

AECID relies on Technical Cooperation Offices (TCO) staff in eight countries with a UN HC⁸ and has posted part-time humanitarian experts in two of them (Colombia and oPt). AECID also has a presence in countries where it has no TCO (Guinea and Sudan), and in all other countries, AECID relies on embassy staff inside the country or outside. They usually have development backgrounds and are selected by AECID and the Head of Mission.

They usually combine this responsibility for humanitarian affairs with a development portfolio or a political task. They follow the humanitarian situation and support their capitals with respect to aspects of Project Cycle Management (PCM), and take part in information-sharing and coordination meetings. Consequently they only dedicate part of their time to humanitarian affairs and often find attending all of the coordination meetings relevant for their work a challenge.

2.1.3. Group 3: Donors with no humanitarian field capacity

Group three includes donors with no capacity to follow humanitarian matters in the field: some donor countries have small embassies with an ambassador and one secretary only.

2.2. (Humanitarian) donor presence in humanitarian crisis locations

2.2.1 Presence at country level

In general, donors base their decision to have a humanitarian capacity on the humanitarian dimension and in some cases the political importance of the crisis. According to the online survey, DG ECHO has the widest ranging humanitarian presence with full-time humanitarian staff in 40 countries.⁹ In general, DG ECHO's Technical Assistants work from offices that are separate from EC Delegations¹⁰.

At least three donors have a (full-time or part-time) humanitarian presence¹¹ in every country with a UN HC except Somalia and at least 10 donors do in eight of them.¹² In 11 countries, one or two donors also have a humanitarian presence outside the capital. In

⁷ 20% of the respondents to the field level questionnaire. One respondent locates staff in government-owned or partly government-owned technical agency offices (Italy).

⁸ Afghanistan, Colombia, Ethiopia, Haiti, Iraq, Niger, oPt, and Timor Leste

⁹ http://ec.europa.eu/DG_ECHO/files/about/what/field_offices.pdf

¹⁰ The policy is that DG ECHO shares offices with the EC Delegations when practically feasible, but operates independently of the Delegation.

¹¹ Based on the 22 capital/HQ replies to the survey, the humanitarian crisis locations with the largest number of humanitarian donor representatives are Afghanistan with 14, oPt with 13, and Kenya and Ethiopia with 12 each. DRC and Sudan also have many donors present with a humanitarian field presence (10 in each country). Timor Leste and CAR have the smallest number, with three donors each (Japan, Australia and Spain and DG ECHO, Germany and France respectively).

¹² Afghanistan, Ethiopia, DR Congo, Kenya, Iraq, oPt, Pakistan, Sudan.

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Afghanistan, seven of them do (Canada, the Czech Republic, Estonia, Germany, Italy, Spain and the UK).¹³

Sometimes country-level donor representatives cover other countries in the same area (e.g. DG ECHO and SDC representatives in Colombia, who both cover Ecuador and Venezuela and a Nairobi-based DG ECHO humanitarian expert who covers Kenya and Eritrea).

2.2.2 Presence at regional level

Australia, the EC (DG ECHO), Finland, the Netherlands, Sweden, Switzerland, the UK and the US (about 40% of the respondents to the capital level survey) have humanitarian staff in regional offices or embassies with multiple accreditations. A number of countries that have such regional structures, i.e. Austria, Belgium, Canada, the Czech Republic, Estonia, Ireland, Italy, Latvia, Luxemburg, and Spain (about 50% of the respondents to the capital level survey), do not use them as bases for humanitarian staff.¹⁴

Box 4: Examples of regional offices or responsibilities

***DG ECHO** has regional support offices in Senegal (for West Africa), Kenya (for Central, Eastern and Southern Africa, and the Horn of Africa), Thailand (for South East Asia), India (for South Asia), Jordan (for the Middle East), and Nicaragua (for Latin America and the Caribbean).*

***OFDA** has regional offices in: Senegal (for West and North Africa), South Africa (for Southern Africa), Kenya (for East and Central Africa), Thailand (for Asia and Pacific), Costa Rica (for Latin America and Caribbean) and Hungary (for Europe, Middle East and Central Asia).*

***PRM** has 28 Regional Refugee Coordinators based in embassies around the globe, including in Thailand (for East Asia), Jordan (for Iraqi refugees in Jordan, Syria, Lebanon, Egypt and Turkey), Jerusalem (for Palestinian refugee issues in the West Bank, Gaza, Jordan, Syria, and Lebanon), Colombia (for refugee and IDP issues in Colombia and the Andes region, i.e. Ecuador, Panama, Venezuela).¹⁵*

***DFID** has three regional advisers who are based in Kenya (for Eastern and central Africa) and London (for Southern Africa and West Africa). The latter travel extensively in the region under their purview.*

***SDC** (Switzerland) has a regional office in Kigali, which covers the Great Lakes Region and DR Congo.*

***The Netherlands** has no specialised humanitarian staff, but diplomats who also look after humanitarian issues. The Netherlands has regional arrangements whereby its embassy in Cameroon covers CAR and Chad, Ghana covers the Ivory Coast, Senegal covers Guinea and Liberia, the Dominican Republic covers Haiti, Thailand covers Myanmar, India covers Nepal, Burkina Faso covers Niger and Indonesia covers Timor Leste.*

Due to security constraints, the crises in Somalia and Iraq are mainly covered from **regional hubs**, i.e. Nairobi and Amman respectively. Similarly, in 2001, when donors could not be present in Kabul, coordination meetings took place in Islamabad.¹⁶ In Southeast Asia, Bangkok is a regional hub for DG ECHO, the UN and the Red Cross but to a lesser degree for bilateral donors who do not have the same regional focus as the EC.

¹³Of these donors, Italy and Germany also have humanitarian representatives outside the capital in North Korea and in Iraq and Afghanistan respectively.

¹⁴ Germany, Norway and France responded that they do not have regional offices or embassies with multiple accreditations.

¹⁵ Their main task is to work with PRM's major partners such as UNHCR, the ICRC, IOM and UNWRA.

¹⁶ Coordination Structures in Afghanistan, Chris Johnson and Jolyon Leslie, Background research for HPG Report 12, December 2002, page 2

2.2.3 Matrix Humanitarian Field Presence

The following matrix on donor presence in crises with an HC is based on the capital-level online survey, interviews, and OCHA contact lists¹⁷. The online questionnaire asked respondents to indicate where they have a **humanitarian field presence**. As some donors explained that their humanitarian representatives wear ‘multiple hats’ and OCHA contact lists include contact details of donor development agency staff, donor presence is marked with a ‘**P**’ to differentiate this type of presence from a full-time or part-time humanitarian presence, which is marked with an ‘**H**’. Places where the humanitarian representative has a regional mandate are marked with an ‘**R**’. Places where the donor has a presence outside the capital are marked with ‘**F**’. The three donors with the biggest humanitarian field capacity (EC, UK, and US) are highlighted in bold letters.

¹⁷ <http://3w.unocha.org/WhoWhatWhere/> - The OCHA contact list and interviews were used to complement information received from 22 respondents to the online questionnaire. Information from the OCHA contact list was not verified by the study team.

Two donors filled in the questionnaire in word format (Denmark and Japan). Their data is therefore not included in the statistical analysis of the online questionnaire but is part of this table. Those donors who did not complete the questions about donor field presence in individual countries are marked in grey. Donors not mentioned in this list do not appear in the OCHA contact list and have not replied to the online questionnaire.

Study on the Mapping of Donor Coordination (Humanitarian Aid) at the field level

Donor	Afghanistan	Burundi	CAR	Chad	Cote d'Ivoire	Colombia	DR Congo	Eritrea	Ethiopia	Georgia	Guinea	Haiti	Indonesia	Iraq	Kenya	Liberia	Myanmar	Nepal	Niger	oPt	Pakistan	Somalia	Sri Lanka	Sudan	Timor Leste	Uganda	Zimbabwe
Australia	P												H	P	P		P	P			P		P	P	P		PF
Austria									P											P						P	
Belgium		P					P												P	P						P	
Canada ¹⁸	PF					P	P		P				P		P			P ¹⁹					P	P			
Czech Rep. ²⁰	PF					P	P	P		P			P	P	P					P	P						P
Denmark	P														P									H			
DG ECHO ²¹	H	HF	H	H	H	H	HF		H	H	H	H	H		HR	H	H	H	H	HF			H	HF	H	H	H
Estonia	PF									P																	
Finland ²²						P																					
France ²³	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P		P	H		P	P
Germany ²⁴	PF	P	P	P	P	P	P	P	P	P	P	P	P	PF	P	P	P	P	P	P	P		P	P		P	P
Ireland ²⁵																				P			P	P		P	
Italy	PF	P		P				P	P						H					P			P	P			
Japan ²⁶	P				P	P	P		P	P	P	P	P	P	P		P	P		P	P		P	P	P	P	P
Latvia ²⁷																											

¹⁸ The Canadian response to the online questionnaire came from CIDA and only listed Afghanistan and Sudan as humanitarian field representation. The additional information in this table is taken from the OCHA contact list.

¹⁹ Plus the Canadian Cooperation Office.

²⁰ The Czech Republic filled in the online questionnaire and added the following comment to the information: “We do not have specific humanitarian staff but diplomats at embassies dealing with humanitarian aid and development cooperation.”

²¹ DG ECHO has regional offices in Senegal, Nicaragua, Kenya, Thailand, India and Jordan.

²² Finland (MFA) filled in the online questionnaire but did not respond to the question regarding its presence. The information in this table is based on the OCHA contact list and refers to the presence of Finnish Cooperation.

²³ France reported that it has humanitarian focal points (“correspondents”) in each embassy, except in Sudan where it has a humanitarian “attaché”.

²⁴ The information given refers to embassies. Germany does not have humanitarian staff in embassies but diplomats wearing ‘multiple hats’. The OCHA contact list also occasionally lists German Technical Cooperation (GTZ) and the German Development Service (DED).

²⁵ Ireland (MFA) filled in the online questionnaire but did not respond to the question regarding its presence. Ireland informed the research team that it has no humanitarian representatives in the field. The information in the table refers to Irish Aid and originates from the OCHA contact list.

²⁶ Information received from the MFA of Japan. “Presence” is in embassies.

²⁷ Latvia replied to the online questionnaire but reported that it has no field level humanitarian presence.

Study on the Mapping of Donor Coordination (Humanitarian Aid) at the field level

Donor	Afghanistan	Burundi	CAR	Chad	Cote d'Ivoire	Colombia	DR Congo	Eritrea	Ethiopia	Georgia	Guinea	Haiti	Indonesia	Iraq	Kenya	Liberia	Myanmar	Nepal	Niger	oPt	Pakistan	Somalia	Sri Lanka	Sudan	Timor Leste	Uganda	Zimbabwe
Luxemburg																			P								
Netherlands	P	P				P		P	P	P			P	P	P					P	P		P	P		P	P
New Zeal. ²⁸													P														
Norway ²⁹	P				P	P	P	P	P		P	P	P		P	P	P	P		P	P		P	P		P	P
Spain	P				P	H	P		P		P	P	P	P	P	P			P	H	P			P	P		P
Sweden ³⁰	P			P	P	P	P		P	P	P		P	P	P	P	P			P	P		P	P		P	P
Switzerl. ³¹	P	P		P		H	P			P		P		P		P		P	P	P	P		P	H			P
UK (DFID) ³²	PF	P		P			H		P				P	P	HR		P	P		H	P		H	H		H	P
US (PRM)	H			HR		HR			HR					H	H			HR		H	H					HR	
US (OFDA) ³³	H						H		H			H		H	HR			HR			H		H	H			H
US (USAID)		P		P		P	P	P	P		P		P		P	P		P		P			P	P			
Total (H+P)	18	9	3	9	7	14	14	7	15	9	8	8	14	12	17	8	8	12	7	17	13	-	15	17	4	12	13
Total P	15	8	2	7	6	10	11	7	12	8	7	6	12	10	12	7	7	9	6	13	11	-	12	11	3	9	11
Total H	3	1	1	2	1	4	3	-	3	1	1	2	2	2	5	1	1	3	1	4	2	-	3	6	1	3	2
Total F	6	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	1	-	-	1
Total R	-	-	-	-	-	-	-	-	1	-	-	-	-	-	3	-	-	1	-	-	-	-	-	-	-	-	-

Table 1 : Donor Humanitarian Field Presence

²⁸ New Zealand/NZAid filled in the online questionnaire but left out the question on field presence. The information in this table is based on the OCHA contact list.

²⁹ NORAD

³⁰ SIDA

³¹ SDC

³² DFID has three Regional Humanitarian Advisers: Eastern/Horn of Africa and Central Africa (based in Nairobi); Southern Africa (in London); and West Africa (in London).

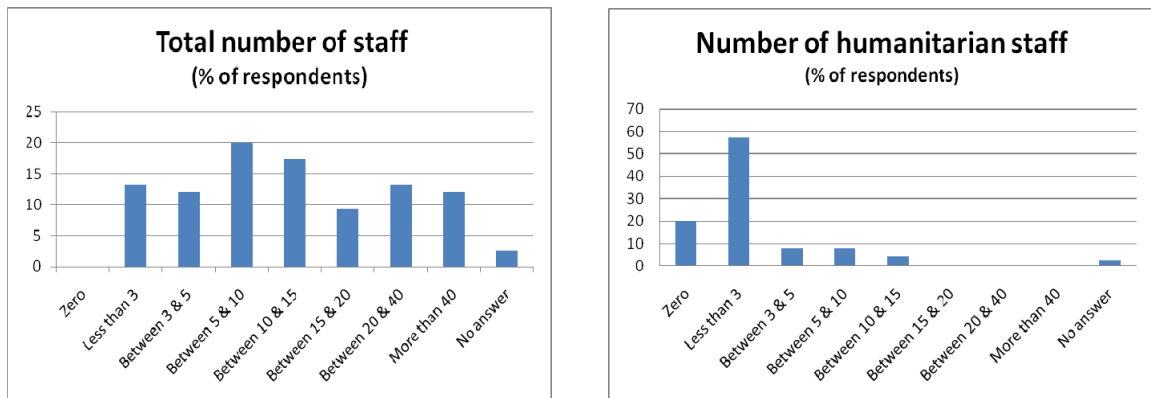
³³ OFDA has regional offices in Senegal (Dakar), South Africa, Kenya (Nairobi), Hungary (Budapest), Thailand (Bangkok), Nepal (Kathmandu) and Costa Rica (San Jose). While OFDA does not have a physical presence in all 27 countries, regional offices provide extensive coverage for all remaining countries with no permanent presence. OFDA has additional temporary presence as needs require.

2.3 Donor humanitarian staff capacity

Only a few donors have field representatives who work full-time on humanitarian affairs. The only donors who in some places have three or more representatives working full-time on humanitarian affairs are the EC (DG ECHO) and the US (OFDA). DG ECHO has the largest capacity in terms of number of staff in 10 locations in the world (e.g. currently 18 Technical Assistants in Nairobi for the Regional Support Office, the Sectoral Support Team, and country offices combined).

Other donors have limited staff capacity. In most locations, bilateral donors do not have a representative working full-time on humanitarian issues, and where they do, they have two at the most, except for Australia which has an exceptionally large field presence of six international staff in Indonesia (only).

Australia, Belgium, the Czech Republic, Estonia, Finland, France, Germany, the Netherlands, Norway, and Spain (60% of the respondents to the capital level questionnaire) said that their humanitarian representatives work half of the time on humanitarian matters, while Italy and Sweden answered that they worked part-time but full-time during emergencies. According to the survey, apart from the EC (DG ECHO), the UK and the US, Australia, Canada and Switzerland also have staff working full-time on humanitarian affairs. In reality, the study found that more donors do (see section 2.5).



Graph 1 and 2: Human resources capacity³⁴

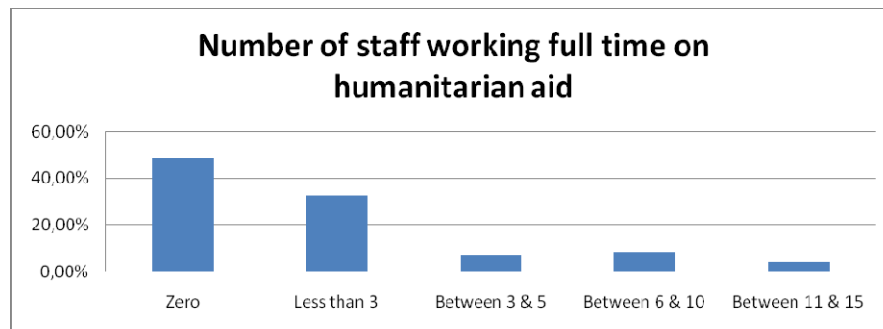
Donor representatives who work part-time on humanitarian matters and part-time on other issues manage their time flexibly, depending on the context, their workload, and personal preference. As a result, the amount of time they dedicate to humanitarian matters varies widely: it can be close to nil for some and go all the way up to 100% in the case of an emergency.

Box 5: Examples of part time humanitarian responsibilities

A bilateral donor representative in Nairobi who covers six countries spends a very small percentage of his time on humanitarian issues and hardly ever finds time to attend humanitarian coordination meetings. In DRC on the contrary, a humanitarian representative of the same country said that time spent on humanitarian issues could go up to 100% during an emergency.

³⁴ Source: Field Level Survey

Germany has humanitarian focal points in every embassy, who are usually in charge of economic cooperation and development. In DRC the focal point is not in a position to attend donor meetings due to time constraints. Instead it is either the representative of the German Ministry for Development Cooperation, based in the embassy, or a representative of GTZ (the federally owned international cooperation enterprise for sustainable development) who attends the meetings.



Graph 3 Number of staff working full time on humanitarian aid³⁵

2.4 Responsibilities and decision-making at field level

In most cases, funding decisions are taken at capital/HQ level and the influence of field representatives on these decision-making processes is limited. In protracted crisis situations, funding decisions are generally taken at capital/HQ level on an annual basis (e.g. related to the CAP cycle or to the annual contributions to UN agencies or the ICRC). Canada, DG ECHO, Estonia, Finland, Ireland, as well as Latvia³⁶ (22% of the respondents to the capital/HQ survey) stated that no decision-making responsibilities are delegated to the field, as opposed to 14% of the respondents to the field level survey (DG ECHO, the Netherlands, Sweden, and the US).

According to the survey, Australia, the Czech Republic, and Germany have delegated grant making/financial decision-making responsibility for up to 100,000 Euro to the field, whereas in the case of Switzerland and the UK, this delegation of authority is for more than 100,000 Euro.³⁷ SDC is undergoing a decentralisation process, while DFID's decision-making is already largely decentralised. DFID allocates financial envelopes for the full spectrum of a country's programme (i.e. humanitarian to development), which their field-based teams then apportion to programmes based on a review of priority needs. In Sudan, for instance, the Humanitarian Adviser manages a budget of about 63 million Euros, the largest part of which goes to the Common Humanitarian Fund (CHF), another part to the ICRC Appeal, and the rest to bilateral grants with NGOs. The delegation to country level does not apply to places where DFID has no country office or regular programme.

Other examples of decentralised management of funds, identified during the visits or interviews, are given in the box below.

³⁵ % of respondents to the field level questionnaire

³⁶ Latvia indicated that it does not have humanitarian staff in the field that could take decisions.

³⁷ Representing 9% of the capital/HQ respondents; 14% of the field level answers to this question answered the same; among these were also Australia, DG ECHO, the Netherlands, Spain, and Sweden.

Box 6: *Examples of financial decision-making at field level*

*In the case of **Japan**, the Economic Assistance Teams located in the embassies manage a Grassroots Grant Assistance Scheme that can be used for humanitarian aid.*

*In Nairobi, 10% of the funding from **Sweden** was allocated at country level, the rest at capital level.*

*In DRC, the **French** Embassy manages a “Social Development Fund” (2 million Euros for 2007-2008). **SDC** in Colombia has financial decision-making authority of up to 40,000 Euro for natural disaster response when the partner is a local NGO and Bern approves of the project, while **AECID**’s TCO in Colombia has a budget line for local purchases in the event of a natural disaster.*

In most cases and to varying degrees, the responsibilities of humanitarian field staff include following, analysing, and reporting on the humanitarian situation, maintaining relations with humanitarian partners, programming, aspects of project cycle management (in particular project appraisal and monitoring), and representation. A few respondents to the survey and interlocutors stressed that the advice and information provided by field representatives are key elements of the decision-making processes at capital/HQ level. However, for most donors, the final decision-making remains at capital/HQ level.

Some donors at capital/HQ level stated in interviews that one of their primary concerns is the quality of the information they receive from the field. The need for a more comprehensive and objective evidence base and the view that agencies inflate financial requirements came up more than once in interviews (including at the field level). A number of donors of Group 2 stated that they are not in a position to contrast the information received through the UN system, governments or their NGO partners, and that their representations generally lack the capacity to carry out in-depth analyses. These donors’ decision-making is largely based on Consolidated Appeal Process (CAP), Red Cross appeals, information provided by partner organisations, OCHA situation reports and information posted on ReliefWeb, and field visits by capital-based Desk Officers. They find the information and contextual analyses received from donors with a larger field presence useful. DG ECHO updates are appreciated by EU donors in capitals and in Geneva.

2.5 Donor capacities in sudden-onset emergencies

When sudden-onset disasters occur, donors of Group 1 and some of those of Group 2 are able to react flexibly and scale up their response capacities as required. The US (USAID/OFDA) has established a specific disaster response capacity, the Disaster Assistance Response Team (DART), which consists of specialists trained in a variety of disaster relief skills. OFDA deploys DART to provide rapid response assistance. “The activities of a DART vary depending on the type, size, and complexity of the disaster.”³⁸

³⁸ See USAID/OFDA Field Operations Guide

Box 7: Examples of donor surge capacity to respond to emergencies

In the aftermath of Cyclone Nargis in May 2008³⁹, OFDA sent a DART team to Myanmar, DG ECHO sent staff from Brussels and the Regional Support Office in Bangkok to reinforce its field office in Yangon, DFID sent humanitarian experts to Yangon, nearly doubling its capacities in Myanmar, and both Norway and Germany (Group 2) sent additional staff to Yangon to participate in local coordination.⁴⁰

France sends reinforcements from its Crisis Cell (Cellule de Crise) in Paris when capacities on the ground are saturated (e.g. Cyclone Nargis, oPt, Chad).

Donors also shift responsibilities internally so as to ensure that additional staff capacity is available during sudden-onset emergencies. Donor representatives with ‘multiple hats’ adjust their work priorities during emergencies. Two respondents at capital/HQ level and 25% of those in the field answered that staff working part time on humanitarian matters would work full time during emergencies.

3. Donor (humanitarian) coordination at the field level

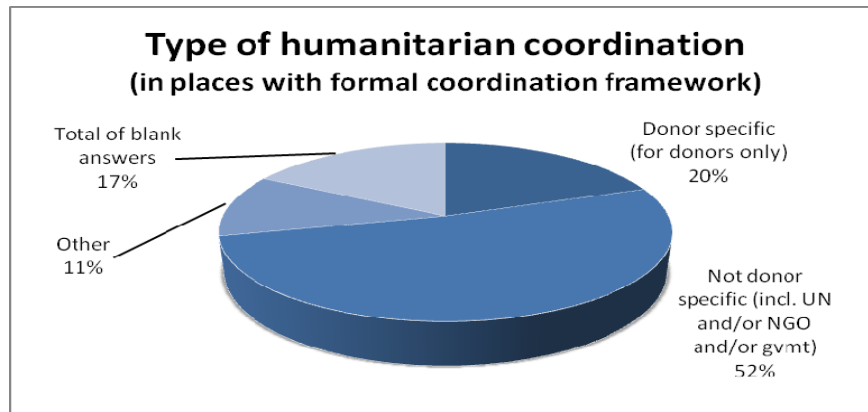
3.1 Responsibility to coordinate with other donor representatives

85% of the respondents to the field level questionnaire replied that they had been instructed to coordinate with other donor representatives (written guidelines, ToR or similar).⁴¹ This instruction is not spelt out in writing for all respondents. Some respondents referred to the GHD principles and a few referred to the European Consensus on Humanitarian Aid in this regard. For some donors these instructions are specific to humanitarian aid (e.g. taking part in the CAP process), while for others it is the usual way of working or the rule in the case of development aid (e.g. the Paris Declaration in the case of Australia). Others (e.g. Spain, the UK) are encouraged to coordinate with other donors. USAID/OFDA’s Field Operations Guide for Disaster Assessment and Response includes references to the coordination of the international response, including with other donors.

³⁹ DFID also scaled up from one representative to four for a limited period of time.

⁴⁰ In the case of Norway, staff from Oslo operated without an embassy in Yangon. In the case of Germany, an expert was recruited to support the German embassy, mainly for the coordination of German actors on the ground.

⁴¹ E.g. Belgium, DG ECHO, and Sweden. The ToR of DG ECHO Technical Assistants include the following responsibilities: 3. develop and maintain regular consultations with the field representatives of other humanitarian donors, especially those of EU Member States; 4. attend meetings of operational co-ordination fora organised by the international humanitarian community or the local or national authorities as appropriate.



Graph 4: Type of humanitarian coordination framework⁴²

However, the interviews revealed that the objectives of coordination at the field level are not spelled out in any way. One of those met in Nairobi asked “What coordination do we want”?

3.2 Types of coordination mechanisms involving humanitarian donor representatives

Several of the **humanitarian field coordination mechanisms** presented below can be regarded as *generic models* in the sense that they exist in most of the countries with a UN HC and are considered standard good practice. A few of them, however, are unique and derive from a specific need in a specific context (e.g. donor-led broad-based humanitarian coordination).

3.2.1 UN humanitarian coordination frameworks involving donors

The most frequent humanitarian coordination framework at the country level is led by the **IASC/Humanitarian Country Team** (UN agencies, the ICRC as an observer, IOM, and a few NGO representatives) and is open to all international humanitarian stakeholders and occasionally host government representatives. These meetings are **convened by OCHA on behalf of the UN Humanitarian Coordinator**, are chaired by either the HC or OCHA, and take place on a fairly frequent basis. In reality, they tend to focus on information-sharing rather than coordination and typically include updates on the security situation, cluster/sector updates and presentations on operations or themes of specific interest. Participants ask questions and share additional information. Minutes are circulated by OCHA to all regular participants and others upon request (e.g. visiting capital/HQ donor representatives). These meetings are appreciated by donor representatives, especially those with a limited capacity. This is one of the *generic models* identified by this study.

Box 8: Examples from case studies

In Nairobi, UN-led coordination mechanisms open to donors include the Regional Humanitarian Partnership Team for Central and East Africa convened by OCHA, which meets with donors every three-four months (but much more frequently among operational actors); the Kenya Humanitarian Forum convened by OCHA, which holds biweekly meetings open to all humanitarian actors including donors; and the Somalia Inter-Agency

⁴² Source: Field Level Survey – ‘Other’ examples include the ‘Friday Group’ in oPt (see sample case) and government-led coordination frameworks.

Standing Committee meetings convened by OCHA and chaired by the UN HC, which meets with donors on a monthly basis⁴³. In Kinshasa, OCHA convenes a weekly Humanitarian Advocacy Group meeting chaired by the UN HC⁴⁴.

In oPt, the UN HC established a Humanitarian Task Force at the donors' request after humanitarian aid was dropped from the scope of the Palestinian Authority (PA)'s Working Group on Social Affairs in the autumn of 2008⁴⁵. The group, which includes the UN HC, OCHA, INGOs, donors and the PA, had met twice as of the end of April 2009 and plans to meet every six weeks.⁴⁶

In almost all countries with a UN HC, there is, according to the survey, a **formal humanitarian donor coordination framework**. In general, it is UN-led. In most countries with a UN HC, in addition to the broad-based IASC/HCT meetings mentioned above, OCHA convenes **donor coordination meetings**, which are chaired either by the UN HC or OCHA and typically involve UN agencies, the ICRC (as an observer) and sometimes a few NGOs. Again, they tend to be information sharing meetings, but agenda items reflect the particular nature of the meetings: coordination with donors (and as such highlight funding requirements). Minutes are circulated to regular participants and other humanitarian actors upon request, such as donor staff in capitals. This is another *generic model* identified by this study.

Depending on their availability and fields of interest, donor representatives also attend **cluster or sector meetings**, but most of them find this difficult due to capacity constraints.

3.2.2 Host government-led coordination mechanisms

Host government-led humanitarian coordination mechanisms exist in many countries, but their capacities, as well as their credibility varies widely from one context to another. At times, donors encourage governments to take on the responsibility for humanitarian coordination, as in Albania at the time of the influx of refugees from Kosovo in 1999. In protracted conflict situations involving the government or countries where the government does not recognize a humanitarian situation, broad-based coordination forums are generally not considered useful by humanitarian stakeholders, including donors.

3.2.3 Donor-led humanitarian coordination

Informal humanitarian donor-only coordination at the field level

The majority of the field respondents to the survey confirmed that they coordinate informally with other donor representatives in the absence of a formal humanitarian donor coordination framework. In all of the countries visited or surveyed through interviews, humanitarian donor representatives coordinate informally, bilaterally or as a small group, whether there are formal donor coordination mechanisms or not. They also consult each other as the need arises (e.g. in Nairobi where EU donors frequently ask DG ECHO humanitarian experts how to use their funds).

⁴³ For more details on Nairobi-based coordination arrangements, see annex 2.

⁴⁴ For more details on DRC coordination arrangements, see annex 3.

⁴⁵ The Working Group on Social Affairs is part of the Local Aid Coordination Secretariat (LACS), itself part of the development coordination framework of the Palestinian Authority.

⁴⁶ For more details on oPt coordination arrangements, see annex 5.

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The replies to the field level questionnaires are consistent with the findings from interviews, namely that informal coordination is directly related to the level of humanitarian expertise of the donor representatives (see categories described in Chapter 2), the availability of funds to allocate (outside Pooled Funding mechanisms where these exist), and indirectly, the donor's approach to funding ("hands-on"/field versus remote/capital). Donor representatives with a programming and PCM role, who share a similar level of expertise and have a good understanding of the reality on the ground (usually DG ECHO, the UK⁴⁷, and the US, with sometimes or alternatively another donor) meet more often bilaterally and as a group than they do with the others. The research team heard numerous references to this group as the "big three", the "group of three", or occasionally "the three +" when another humanitarian donor representative is actively involved. Donor representatives with humanitarian expertise⁴⁸ tend to engage more with other 'experts' than with 'informed generalists', especially when information is limited or complex situations arise. This is another *generic model* identified by the study.

Donor representatives who are mainly interested in information are more easily satisfied with briefings and situation updates, which they get from UN-led coordination meetings. As a result, informal meetings rarely include representatives of donor representatives with no humanitarian background, except in some cases. Bilateral information exchange, however, takes place among a wider group in the margins of meetings and by telephone and email.

Who donors coordinate with informally is also a function of personality, language and culture. One respondent used the term "self-selection" to describe how informal donor coordination groups establish themselves.

Informal meetings are appreciated for their straightforwardness, depth of analysis, operational usefulness, and confidentiality. They are opportunities to exchange information (including occasionally funding intentions), views, and concerns about a wide range of topics going from operational or cross-cutting issues to the performance of humanitarian actors and tools that are key for the implementation of the humanitarian reform (e.g. from Nairobi: the OCHA offices, NIPHORN⁴⁹, the IPC⁵⁰, the quality of needs assessments, etc.). They sometimes take place for a debriefing after one of the "group of three" has returned from a visit to field locations. They sometimes trigger joint action by the group itself or by their Heads of Missions.

While such meetings do not involve joint planning and programming, it is fair to say that some "alignment" takes place and that the donors involved sometimes find ways of being complementary (e.g. supporting an NGO project which another donor cannot due to its mandate, its priorities or the unavailability of funds just then).

Informal meetings tend to be ad hoc. Their frequency depends on the need and tends to increase steeply when a disaster looms, when the humanitarian situation worsens, or in the event of a sudden-onset disaster (see box). Weekly meetings are exceptional, meetings every

⁴⁷ In oPt, DFID, DG ECHO, and USAID do not have the close relationship found elsewhere. DFID has only recently deployed a humanitarian adviser, and DG ECHO and the US pursue different policies and funding approaches.

⁴⁸ This includes DG ECHO's generalists and sectoral experts.

⁴⁹ Nutrition Information Project for the Horn of Africa

⁵⁰ Integrated Food Security Phase Classification

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second week might take place during emergency situations, but otherwise, they tend to be monthly or less frequent.⁵¹

Due to its capacity and central position for the EU, DG ECHO often plays a central role in terms of bringing donors together. In Colombia, for instance, at the request of the Czech Embassy during its Presidency of the EU, the DG ECHO humanitarian expert presented DG ECHO's Global Plan for 2009 to humanitarian and development cooperation staff of EU Member States. This elicited much interest and contributed to strengthening relations between DG ECHO and other (EU) donor representatives. In Sudan, DG ECHO organises debriefings with other humanitarian representatives after field visits.

Box 9: Example from the Myanmar Case Study

Several donor representatives were present in Yangon when Cyclone Nargis struck in May 2008,⁵² and as they knew each other well, they rapidly started coordinating informally. They also attended UN-led meetings, but with new people arriving, these became larger and the information flow less straightforward. Donors therefore decided to meet separately once per week to coordinate and map aid activities so as to ensure complementary geographical and sector coverage.⁵³ More donors joined in as they arrived. Meetings were kept short (about one hour) and viewed as efficient. No minutes were taken. More detailed coordination was left to bilateral exchanges. If required, other actors were invited to give briefings. Donors with a larger field presence were able to establish sector specific coordination⁵⁴. Several donors visited the delta together.⁵⁵ Meetings became less frequent as the emergency subsided. Four months later, the group only met on an ad hoc basis and otherwise exchanged information by email or telephone.

Indications are that communication channels between donors and other coordination mechanisms are inadequate for consultation on issues of substance, despite the existence in most places of an IASC/HCT coordination meeting with donors. The 2005 Lessons-Learned on the Burundi pilot⁵⁶ provides the perspective of other stakeholders on the way donors coordinate: "Donors are perceived to have ad hoc meetings among themselves or bilaterally with agencies and NGOs, and to provide little formal feedback as a group". This view was also expressed by OCHA representatives in Geneva and in the field in the course of this study, in particular with respect to donors expressing themselves with their funding rather than communicating their views (e.g. the CAP).

"Formal" humanitarian donor-only coordination at the field level

Formal donor-only humanitarian coordination mechanisms exist in **DRC and Sudan**, both of which are GHD pilot countries, and the DG ECHO office for oPt is considering taking up an idea from Ireland to introduce a donor-only meeting attached to the Humanitarian Task Force meetings. This coordination mechanism cannot yet be considered a *generic model*, but it may

⁵¹ Source: Field Level Survey and interviews

⁵² The most active participants in terms of regular presence and input were AusAID, the EC (DG ECHO), Japan, and the US (OFDA); other donors present were France, Germany, Italy, and the UK. Singapore, South Korea and Thailand were present as well but less involved in coordination.

⁵³ The US technically supported this by providing aerial maps indicating aid activities.

⁵⁴ An example given was DFID: DFID's team of 6 humanitarian specialists had sector expertise; DFID led coordination for livelihoods and agriculture. Recovery was challenging as it was a technical issue with a political dimension.

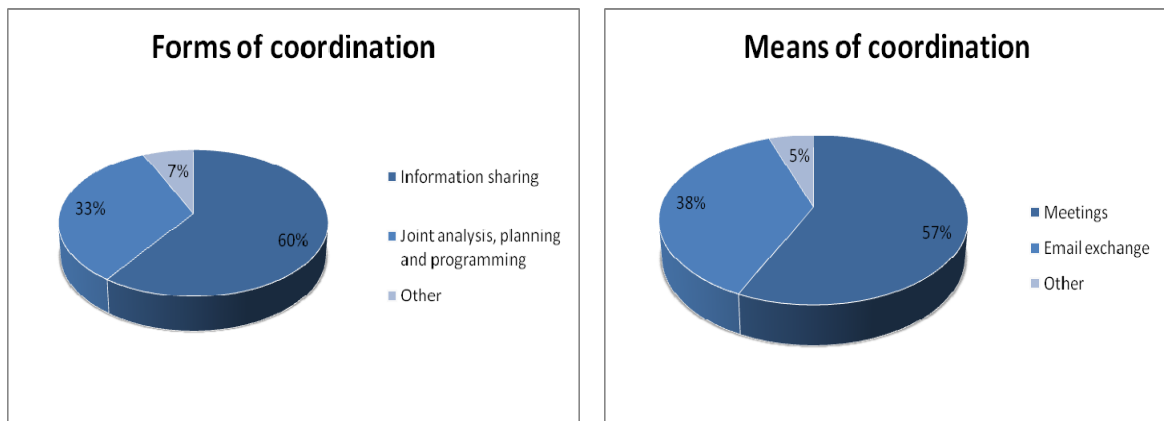
⁵⁵ AusAID, DG ECHO, DFID, and OFDA

⁵⁶ Lessons Learned from the Good Humanitarian Donorship Pilot in Burundi 2002 – 2005, Sally Gregory, DFID, 9 December 2005, p.8.

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become one. In DRC, the GHD Group is perceived as giving donors more leverage vis-à-vis other humanitarian stakeholders, in particular the UN, which enables them to play a useful “checks and balances” function (e.g. promoting partnerships, safeguarding NGO interests, etc., in the spirit of GHD General Principle 10). As one person put it “we are no longer diluted when compared to the others”. In Sudan, achievements of the Humanitarian Donor Group include eliciting and supporting diplomatic action at international level (capitals/HQs and meeting in New York in April 2009), bringing coherence to advocacy efforts and messages by agreeing upon and regularly updating a “core script” for donors at all levels, and giving INGOs a single outlet for expressing their concerns and consulting with donors (instead of the former having to see donors one by one).

The study team found no evidence of joint programming, except perhaps at the time of the North Kivu emergency last year, when the humanitarian experts moved to Goma and kept coordinating in order to ensure as comprehensive and complementary a response as possible. Convergence of positions and approaches takes place and the group sometimes conveys joint messages to the HC who on at least one occasion was invited to the meeting (in connection with the 2007 CAP requirements).



Graph 5 and 6: Forms and means of coordination at field level⁵⁷

Box 10: Examples from DR Congo and Sudan

In Kinshasa, GHD donor representatives (Belgium, Canada, DG ECHO, Germany, France, Japan, The Netherlands, Spain, Sweden, the UK and the US) have a donor-only humanitarian coordination framework, the GHD Group, which is convened and chaired by DFID’s Humanitarian Adviser every 6-8 weeks. Donor representatives value this forum. The Chairperson sometimes circulates a summary note by email. Notes are also forwarded to the London-based GHD focal point. Chairing this forum, however, represents extra work and requires personal dedication, knowledge, as well as communication, coordination and leadership skills.⁵⁸

In Khartoum, a Humanitarian Donor Group (comprising representatives of Canada, Denmark DG ECHO, DFID, France, Japan, the Netherlands, Norway, OFDA, Sweden, Spain and Switzerland) meets once or twice per month in DG ECHO’s office. It had a rotating Chair until March 2009, which used to alternate among the DG ECHO, DFID, and OFDA representatives. After the expulsion of 13 international NGOs on 4 March 2009 and the subsequent increase in the workload of the above donors, Canada’s Head of Aid took the initiative to convene the first post-March 4 meeting and assumed its chairmanship. Since then the meeting has been hosted by the Canadian Embassy. The agenda is established on the basis of suggestions from donor representatives and

⁵⁷ Source for Graph 5&6: Field Level Survey – Other in graph 5: Advocacy, research, alignment of positions, fundraising from the UN – Other in graph 6: Calls, field trips

⁵⁸ For more details on DR Congo see annex 3

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minutes are prepared and circulated by the chairperson. Especially in recent weeks, this platform has been instrumental in facilitating coordinated action at the level of Sudan Heads of Mission or international level (e.g. high level meeting on 24 April 2009 in New York). A UN agency or NGO is occasionally invited to the meeting, as required.

Meeting among donors enables them to pool available knowledge and information on the basis of respective strengths and perspectives, to bring up matters of particular interest to them as a group of peers, to contrast views, agree on joint action and develop common positions if required. Such meetings enhance communication and mutual understanding among donors with different approaches (e.g. to funding), enable donor representatives with less humanitarian experience than the full-time humanitarian experts to get a better understanding of the reality on the ground and to familiarise themselves with humanitarian/GHD principles. They facilitate contact between donor representatives who may otherwise not interact or even be aware of the presence of a particular humanitarian donor representative (e.g. of Colombia, where the three donor representatives interviewed meet informally and bilaterally with different sets of donor representatives).

An additional advantage of donor coordination brought up in DRC and one of the interviews at capital/HQ level is that it mitigates the risk of donor competition often caused by the pressure to act quickly when a crisis becomes more acute or a sudden onset emergency occurs.

The GHD Group in DRC is perceived by its members as having contributed - together with the humanitarian reform (including the clusters and the presence since 2004 of the same Humanitarian Coordinator) and the CHF - to improved humanitarian coordination and aid effectiveness since 2004. The fact that operational coordination is largely dealt with in the framework of the CHF, which as a funding mechanism provides more funds than the EC or the US, was brought up as a factor contributing to the success of the GHD Group meetings, since donor representatives are able to focus on strategic rather than operational issues during the meetings.

Both in Nairobi and capital/HQ level, fears were expressed about creating an “additional layer of coordination”, but the research team has not met anyone having experienced a donor-only coordination forum who said they did not appreciate having one or would not recommend one elsewhere.

Interviews with donor representatives in DRC and Sudan and the fact that the rotating arrangements in place for ensuring the chairmanship of the Humanitarian Donor Group did not withstand the additional workload brought about by the new crisis situation (see Box 10) highlight the need for the chairperson to benefit from technical assistance, not only for holding and chairing the meetings but also for getting the most out of them.

Field level donor-led coordination involving the UN

Donors occasionally take the lead in establishing formal information-sharing frameworks with key humanitarian actors. An example was found for oPt, where DG ECHO convenes and chairs the EU Informal Humanitarian Policy Dialogue Group, better known as the «Friday Group Meeting» as it convenes every other Friday. Participation includes EU donors and other donor countries. UN agencies, ICRC and NGO representatives are invited to brief the humanitarian donor community. DG ECHO prepares and rapidly circulates minutes of the meetings. DG

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ECHO inherited this responsibility about four years ago from the European Commission Technical Support Office (ECTAO), which in 2002 established and chaired an EU Informal Humanitarian Policy Dialogue Group for EU Member States.

Its original purpose was to promote cohesiveness and consistency among donors, in particular in terms of advocacy. Participation was later enlarged to Canada, Switzerland, Norway, Japan, and recently the US. Nowadays, the meetings mainly serve to share information. They are well attended and perceived as useful. Donors with limited humanitarian capacity regard them as a more efficient way of getting information than reading all available reports⁵⁹. DG ECHO provides staff resources for this purpose.

Another example is the Bangkok-based coordination framework chaired and facilitated by DG ECHO for the humanitarian response for refugees from Myanmar in Thailand. Meetings take place every two months and on an ad hoc basis if needed. They are regularly attended by The Netherlands, Sweden, Switzerland, the UK and the US. NGOs and the UN are invited to the meetings occasionally. DG ECHO has taken the lead role. UNHCR -because of the status of the refugees in Thailand- is not involved in providing humanitarian assistance to the refugees. Coordination is further facilitated by the fact that one central implementing partner, the Thailand Burma Border Consortium⁶⁰, is providing the bulk of the assistance to the refugees.

Country-based recovery and development-oriented donor coordination frameworks

These seem to exist in almost all contexts⁶¹ and fall into two broad overlapping categories: those led by Heads of Mission and those among development cooperation departments. Examples of the first category were found in Kenya and Somalia (i.e. the Donor Coordination Group⁶² and the Somalia Donor Support Group respectively). Both were described as being reconstruction and development-oriented. Humanitarian actors, including humanitarian donor representatives, said they have little access to the former, except on an ad hoc basis, whereas the latter is perceived by some humanitarian actors as having complicated humanitarian engagement.

Two thirds of the respondents to the field level questionnaire stated that there is interaction and coordination between humanitarian donor representatives and their development counterparts. EU Member States have their own specific coordination mechanisms, which include regular Heads of Missions meetings and EU Development meetings.

Box 11: *Examples of interaction and coordination between humanitarian and development counterparts*

- *Development coordination frameworks put humanitarian aid on the agenda when a crisis comes up (e.g. Haiti)*

⁵⁹ The Gaza crisis is said to be so well documented that prioritising information sources requires time and resources.

⁶⁰ The Thailand Burma Border Consortium brings together 12 international NGOs from ten countries that are providing food, shelter and non food items to refugees and displaced people from Myanmar. Currently, more than 30 donors contribute to its budget, over 90% of which is provided by 16 donors: Australia, Belgium, Canada, the Czech Republic, Denmark, the European Commission, Ireland, New Zealand, Norway, Poland, Spain, Sweden, Switzerland, the Netherlands, the UK and the US.

⁶¹ 94% of the respondents to the field level questionnaire answered yes to whether non-humanitarian donor coordination exists in their location.

⁶² Also called the Development Coordination Group.

- *Humanitarian actors are invited to development coordination meetings (e.g. Nairobi)*
- *The same donor representative handles development and humanitarian aid*
- *EU coordination mechanisms have both on the agenda (e.g. Heads of Mission meetings at country level)*
- *The rehabilitation/reconstruction framework overlaps with humanitarian and development aid and therefore brings both together (e.g. Northern Uganda)*
- *In oPt, they are so closely linked that there is less separation from the start*

Geneva-based humanitarian donor coordination

The study came across a case of good practice in Geneva, where in 2006 donors established a **Donor Contact Group on Chad**, under the leadership of the UK. This initiative can be explained by a combination of factors including a limited humanitarian donor presence in Chad (DG ECHO, France, and OFDA, with DFID covering the crisis from Khartoum) and awareness in Geneva, through information received from the field (especially DG ECHO and DFID), that **problems inherent to the UN system were preventing a coherent and equitable humanitarian response** (specific mandates) to the needs of refugees from Sudan, IDPs, and host populations suffering from chronic vulnerability.

As the UN system had structured its response along the lines of mandates for beneficiary groups (with UNHCR focussing on refugees while the capacities in place for attending to the needs of IDPs and host populations were weak), needs were not prioritised across the board, and the UN RC/HC was struggling to establish coordination among UN agencies. Donors were highly concerned by this problem, particularly against the backdrop of the humanitarian reform, and decided, as one of them put it, to “turn up the heat” by working together to raise the profile of the problem. Donor representatives⁶³ got together to exchange information and views and agree on consolidated positions to convey to the UN.

The process involved humanitarian stakeholders other than donors and the UN (ICRC and INGOs) and was complemented by donor visits to Chad and high profile advocacy⁶⁴. This group did a lot of preparatory groundwork, relying entirely on the dedication of the chairperson and donor representatives, and was effective in generating the critical mass of thinking necessary to trigger change. There were six meetings in an 18-month period.

The lesson learned from this experience is that **interaction between field-based donor representatives and capital-based ones can make a real difference** provided that the objectives are clear and the process is bottom up (i.e. based on a demand from the field) and remains well connected to the field.

This is the best example of interaction between a group of humanitarian donors in the field and a coordination forum at capital/HQ level found in the course of this study, although references were made to other ad hoc and shorter lived instances. For instance, in 2005 DG ECHO, DFID and OFDA disagreed with the contents of a three-year WFP PRRO for the Great Lakes Region and triggered action at their Heads of Mission and capital/HQs levels. A number of other donors aligned themselves on the position of the three, following which the regional PRRO was

⁶³ Australia, Canada, DG ECHO, France, Germany, New Zealand, the “Nordics”, the UK and the US (non-exhaustive).

⁶⁴ For instance, a Minister of State of the UK invited to give a speech in Geneva about the reform of the humanitarian system and sharing the podium with the UNHCR High Commissioner, brought up the situation in Chad, which created a stir.

abandoned by WFP's board. It is important to note, however, that interaction between the field level and the capital/HQ level takes place through internal donor channels and not between groups at both levels through their chairpersons.

International reconstruction and development-oriented coordination

Several coordination frameworks of this type, generally established in the context of international reconstruction conferences, were identified through this study, but not directly studied. Therefore, the research team is not in a position to indicate whether there are direct links between them and humanitarian donor representatives at country-level. Linkages are likely to follow individual, internal donor channels.

Examples of such platforms, which usually facilitate international donor meetings at high level (in a different place) include the Afghan Support Group, established to follow up on the International Forum on Assistance to Afghanistan held in January 1997 in Ashgabat, Turkmenistan to discuss aid policies for Afghanistan; the "Tokyo Co-chairs"⁶⁵ group for Sri Lanka, which developed following the Donor Conference on Reconstruction and Development of Sri Lanka in Tokyo in June 2003 and has actively advocated for respect for international humanitarian law and the protection of civilians caught in combat zones in April 2009; the informal Somalia Contact Group established in June 2006 in New York to support the Transitional Federal Government and peace and reconciliation in Somalia, and the G-24 established in 2003 in London in support of a lasting peace in Colombia.

Box 12: Regional donor presence and coordination in Amman

Donors without a presence in Iraq meet in Amman. Meetings do not take place at regular intervals but when the need arises. They have no official outcome, but participants report back to their capital/HQ if there has been consensus on issues. The results of the meetings are used in daily work. In 2009, the group met 4-5 times. The meetings focus on sharing information (e.g. on the CAP and what will be prioritised by the different donors), reaching a common understanding of the situation, and coordination. Donors who have no embassy in Iraq find this information important for the follow-up of projects or as a part of a need assessment for new programming.

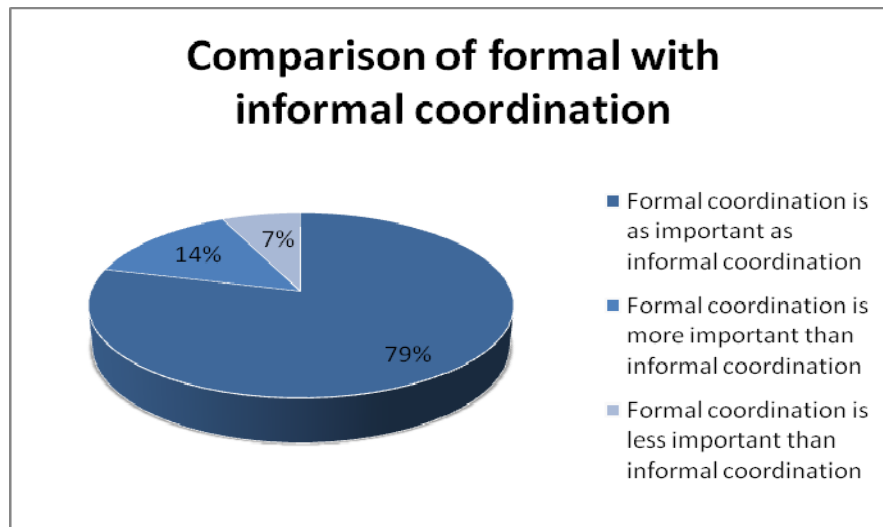
Participants include Austria, Belgium, Canada, Denmark, DG ECHO, the European Commission, Germany, Iceland, Japan, Sweden, Switzerland, the UK, and the US. Participation is open and occasionally includes non GHD-donors (in April, Egypt was added on to the list).

3.3 Comparative advantage of formal versus informal humanitarian coordination

The vast majority of respondents to the field survey (see Graph 4) stressed the **usefulness of having both formal and informal coordination arrangements**. Each way of coordinating has advantages and disadvantages. On occasion, donors meet informally before larger formal meetings take place, which enables them to prepare, for instance by agreeing on a common position that is then communicated in the formal meeting.⁶⁶ Informal coordination can pave the way to formal coordination.

⁶⁵ The co-Chairs are the EU, Norway, and the US.

⁶⁶ The Humanitarian Task Force in oPt, and a donors' meeting prior to a funding conference for the response to the Myanmar disaster are examples.



Graph 7: Perception of comparative importance of formal and informal coordination⁶⁷

Advantages and disadvantages of formal and informal coordination were described as follows:

	Advantages	Disadvantages
Formal coordination	<ul style="list-style-type: none"> • Documentation and transparency (= accountability) • Obliges participants to engage and collaborate • Powerful when it comes to advocacy 	<ul style="list-style-type: none"> • Donors have difficulties to commit • Often inefficient and unstructured and thus a waste of time
Informal coordination	<ul style="list-style-type: none"> • Information is shared more easily • Easier to participate as there is no commitment • Greater flexibility • More dynamic • More timely • Can prepare the ground for formal common positions 	<ul style="list-style-type: none"> • Does not necessarily lead to decision making. • Usually no written traces⁶⁸

Table 2 Advantages and disadvantages of formal and informal coordination

3.4 Factors contributing to donor coordination

Factors contributing to donor coordination include:

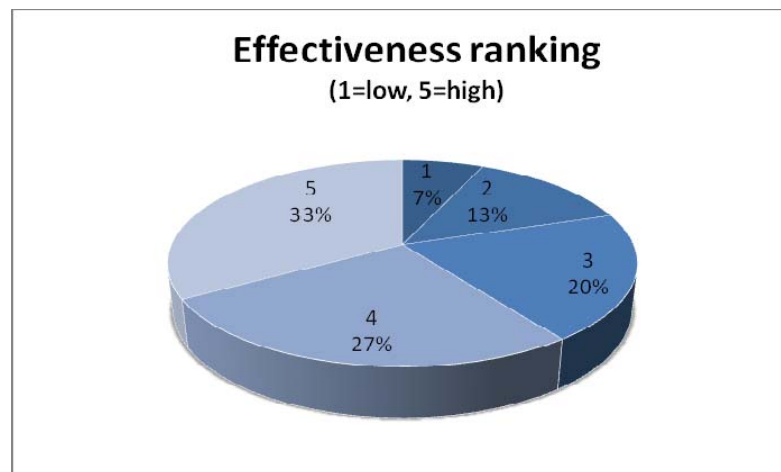
- Similar job descriptions, levels of expertise, and a common humanitarian “culture”,
- Similar objectives and operational interests, such as possibilities of complementarities (e.g. disaster prevention in Colombia), the need to avoid duplication and ensure as comprehensive as possible a coverage of needs (e.g. last year’s emergency in North Kivu and response to Cyclone Nargis), or having operational partners in common,

⁶⁷ Source: Field Level Questionnaire

⁶⁸ About 60% of the field respondents share the outcomes or minutes of coordination meetings with colleagues at capital/HQ level. About 20% share them with colleagues at regional level and about 25% share them with other donor representatives. One donor stated that outcomes and minutes are shared with NGOs from this donor country.

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- Similar concerns of an ongoing (e.g. humanitarian access) or ad hoc nature (e.g. around the Humanitarian Emergency Response Fund in oPt⁶⁹, an imminent emergency, etc.),
- Complexity of the humanitarian context and/or the challenges of specific constraints on the provision of humanitarian aid,
- Importance attached by capitals/HQ to coordination and perception by the field that it has a margin of manoeuvre to make a difference,
- Perceptions of increased complementarities and leverage as a group,
- The number of humanitarian donor representatives in-country (critical mass),
- Geographical proximity (not having to lose a lot of time in traffic),
- Personal factors such as character, trust, language,
- When it comes to the actual meetings, the knowledge and skills of the chairperson, the relevance of the issues brought up at strategic and operational levels, the added leverage gained as a group, and simpler things like the amenities of the venue.



Graph 8: Effectiveness of donor coordination frameworks⁷⁰

Graph 8 should be seen in the light of the comments given by donors with their answer. Positive comments to this question mainly refer to information sharing rather than coordinated action. Positive comments usually refer to informal coordination frameworks.

3.5 Factors discouraging donor coordination

Factors discouraging donor coordination include

- The existence of other coordination frameworks and not seeing the advantage of donor-only coordination,
- Coordination fatigue (in particular in contexts with multiple coordination frameworks e.g. Nairobi),
- Perceptions of self-sufficiency,
- Different levels of expertise,
- Capacity and time constraints to convene, chair or attend meetings⁷¹;

⁶⁹ The HERF is chaired by the HC and administered by OCHA with the approval of the Advisory Board. Donors are members of this board.

⁷⁰ Source: Field Level Questionnaire

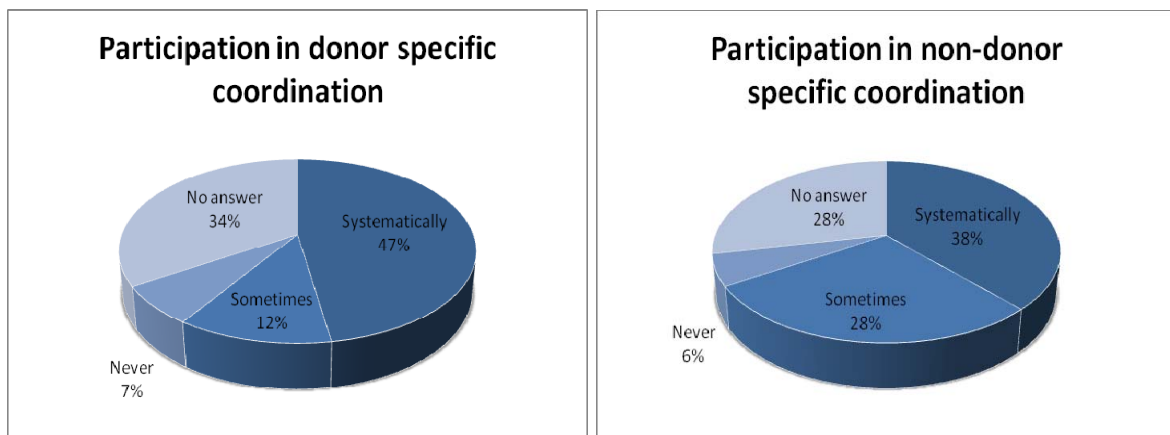
⁷¹ See for example *The Office of the Auditor General's investigation into the effectiveness of Norwegian humanitarian assistance*, Document no. 3:2 (2008–2009): “Limited capacity limits both the foreign service

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- Lack of leadership or initiative among donors,
- Unclear or irrelevant objectives,
- Perceived differences in policies and approaches,
- Perceived breaches of key principles such as neutrality or independence by a donor,
- Centralised decision-making which leaves field representatives little room for manoeuvre,
- Personality.

The field respondents to the survey did not come up with entirely new ideas about how to improve the donor coordination framework. Answers can be grouped as follows:

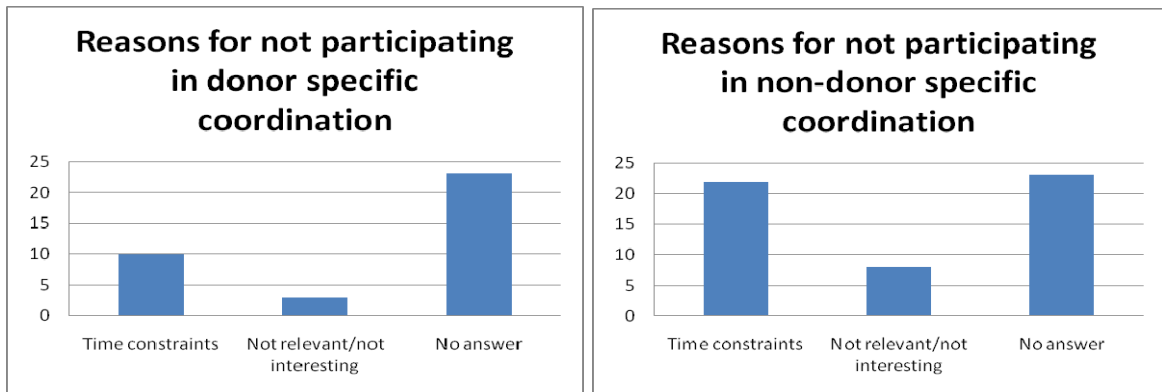
- Make strategic adjustments to the coordination framework, based on an analysis of the coordination needs and the coordination capacities; structure existing coordination and make it more efficient and results-oriented,
- Donors should work more strategically, focus on the needs and should not only implement their own policies, have more advisory capacity available,
- Encourage the UN to fulfil its role in coordination and leadership (HC/OCHA//Cluster leads),
- Link up or reinforce the host government in its coordination role,
- Ensure that there is a donor coordination framework in place,



Graph 9 and 10: Donor participation in coordination frameworks at the field level⁷²

missions and the Ministry of Foreign Affairs' opportunities to contribute to and follow up the UN system's coordination in the countries that receive humanitarian assistance, and to coordinate with other donor countries." Similar findings can be found in other studies (e.g. *Dutch Humanitarian Assistance-An Evaluation*, July 2006 page 11)

⁷² Source: Field Level Survey



Graph 11 and 12: Reasons for not participating in coordination frameworks⁷³

Respondents to the field level questionnaire gave as the main reasons for the **absence of formal donor coordination arrangements** that other coordination mechanisms exist (e.g. led by the UN). Existing coordination mechanisms are mentioned as a factor preventing donors from establishing (another) coordination framework when capacity to take part in meetings is low. A few indicated that there is no authority to initiate donor coordination and a few that the UN failed to initiate such coordination. A number of respondents could not provide any explanation.

In some contexts, donor representatives seem to find their numbers too low to have formal coordination arrangements (e.g. Colombia, Zimbabwe, and Myanmar). In Nairobi, donor representatives do not see what added-value a donor-only meeting would bring, that they are satisfied enough with meeting informally, and that there are already many meetings and little time to spare for an extra one. It should be noted that in Nairobi, the complexity of the regional and country coordination mechanisms, the number of meetings and their occasional overlaps, as well as sometimes, their questionable quality, have become a disincentive for coordination. Several donors complained that coordination structures ‘had gotten out of hand’. A few donor representatives at capital/HQ level indicated that they saw no need for formal donor coordination since the UN is in charge of humanitarian coordination. Interestingly enough, DG ECHO and OCHA in Nairobi are often consulted by donor representatives on the activities of other donors.

In Colombia, the three donor representatives interviewed consult with different, slightly overlapping, sets of donors, selected on the basis of common programmatic and operational interests. None of the three was aware of the presence of the representative of another major humanitarian donor. UN-led coordination mechanisms exist but tend to focus on natural disaster risk reduction and management (see annex 6). Of the humanitarian crises looked at for this study, Colombia appears to suffer from a coordination deficit around security, IDP, and protection of civilians issues. This was explained as being largely due to everybody adopting a low profile as a consequence of the government’s denial of these issues. Reinforced, and inclusive, donor coordination, informal or formal, might be a first step in the right direction, but would require support at a diplomatic level from Heads of Mission and capital/HQs.

⁷³ Source: Field Level Survey

4. Awareness and putting into practice of GHD principles at the field level

4.1 Awareness of GHD principles

Most field-based humanitarian donor representatives are aware, to varying degrees, of the GHD initiative and principles, but for most, in a rather vague way.⁷⁴ The majority of respondents to the field level questionnaire stated that they do not have guidance to implement GHD in the field (54%) and no clear instruction to promote GHD implementation among donor representatives (68%). Some of them clarify, however, that GHD is part of their regular work and global commitment, which is consistent with statements made by several interlocutors to the effect that the principles enshrined in the GHD framework guide their approach, even if they do not refer to them as such. For them, they are “good practice” or “common sense”. Japan, which is involved in the GHD initiative as an observer, bases its approach to humanitarian and development aid on the “Human Security” concept.

4.2 Understanding of the role of the field in putting GHD principles into practice and related guidance

Two thirds of the respondents to the questionnaires for capitals expect their humanitarian field representatives to play a role when it comes to putting GHD into practice.⁷⁵ One third of them answered that the ToR of field representatives include the instruction to coordinate with other donors⁷⁶ and Norway and the UK replied that it is included in operational guidance for field staff. The Czech Republic and Switzerland stated that field staff is not explicitly expected to coordinate with other humanitarian donors.⁷⁷ Canada and Finland indicated that this responsibility is included in instructions to embassies or embassy staff job descriptions.

4.3 Guidance for putting GHD into practice

90% of the capital/HQ level respondents to the questionnaire state that their country’s policies, mission statements, or operational guidance refer to GHD.⁷⁸ Several donors have GHD Domestic Implementation plans/strategies (Canada, Denmark, Finland, Ireland, the Netherlands, Sweden, the UK) and others have implementation plans in the pipeline (e.g. DG ECHO, Spain). The policies of many donors refer to the GHD principles (e.g. Australia, Belgium, Denmark, Spain, the UK, and the EU’s European Consensus on Humanitarian Aid). However, most do not refer to the possible role of the field or include any advice for the field for putting GHD into practice.

Guidance to field staff is provided in different ways. One third of the capital/HQ level respondents say that GHD is included in trainings and one third state that operational guidance

⁷⁴ One respondent to the questionnaire stated that he has only heard through this study about GHD and a few respondents showed sincere misunderstanding of the concept in their answers.

⁷⁵ Australia, Austria, DG ECHO, Estonia, Finland, the Netherlands, Spain, Sweden, Switzerland, the UK, the US - (Question 11 of the capital level questionnaire).

⁷⁶ Australia, Austria, Belgium, DG ECHO, France, Germany, Sweden, the US.

⁷⁷ Source: Question 15 of the capital level questionnaire.

⁷⁸ Source: Question 10 of the capital level questionnaire. One respondent states that no such policies exist and one states that their policies, mission statements, or operational guidance do not refer to GHD.

to field staff includes GHD. However, only about 20% of the field level respondents said that they have received operational guidance or training to put GHD into practice. Some donors include GHD in their briefings for staff before they go to the field, a few donors disseminated the Danish Guidance Note, and some include GHD in yearly retreats with their humanitarian staff. Representatives of one donor country in Geneva stated that they had realised at capital level that their field staff were not well-informed and an effort was required, but also that there was **resistance** on the part of field staff who believe they are doing things right in any case.

Only 40% of the field representatives who responded are confident that they know how to put GHD into practice. Those familiar with the initiative (e.g. through involvement in one of the field pilots or previous functions at capital/HQ level) find it easier to work with the GHD framework. Some respondents openly admit their lack of knowledge and understanding of the initiative and many request more guidance and instructions. Some refer to their development aid background to explain their uncertainties. GHD tends to be perceived as a Headquarters-led initiative on which little information has trickled down and some respondents refer to the primary role of capitals/HQ when it comes to implementing GHD.

The words of one of the donor representatives in Geneva sums up well what the research team heard on several occasions: **“GHD is not a formal, legally binding process, but an aspiration”**. Several donors in Geneva and the field also pointed out that there is **no clarity as to what the 23 principles mean operationally**. According to one of them, **guidance would need to be provided for each one of the points and best practice** identified for each one as well. The 2005 lessons learned study on the Burundi GHD pilot had already pointed out a divergence of views as to what GHD is supposed to achieve and the “overwhelming sentiment...that GHD in practice requires clarification”.⁷⁹

The limited knowledge of GHD principles in the field is likely to be partly related to the lack of clarity as to their meaning and operational implications as well as of **the role field representatives can play and how**. There seems to be a perception that the main contribution of the GHD initiative for the field is the availability of more flexible and needs-based (pooled and/or un-earmarked) funding.

4.4 Efforts to put GHD principles into practice in the field

Pooled Funding put aside, the team only found vague indications of donor representatives having looked into the potential of using the GHD framework as a group, except for a recent attempt by the Netherlands in oPt. GHD principles as such are not explicitly used, including in countries where GHD-inspired donor-only coordination mechanisms exist (e.g. DRC and Sudan, both GHD pilot countries). Nevertheless, $\frac{3}{4}$ of the respondents to the capital level survey answered that in countries where GHD had been put into practice, the effectiveness of donor coordination has improved. On the other hand, they had trouble providing examples. Two thirds of the capital/HQ respondents could not give examples of countries where this had happened. DRC and Sudan were mentioned most often by those who said they could. Other examples were Georgia after the crisis in 2008, Ethiopia and Somalia with reference to pooled funding, Zimbabwe, and Amman (for Iraq).

⁷⁹ Lessons Learned from the Good Humanitarian Donorship Pilot in Burundi 2002-2005; Sally Gregory; DFID; December 2005, p. 6.

Study on the Mapping of Donor Coordination (Humanitarian Aid) at the field level

Capital/HQ respondents to the survey named as the **main obstacles** for GHD implementation at the field level: staff capacity and time constraints (33%); that some principles cannot be acted upon at the field level (about 25%); the lack of a plan of achievable action based upon GHD principles (12%); the lack of agreement among GHD donors as to which principles to prioritize (8%), and the lack of leadership among donors (4%).

Interviews revealed that willingness to engage in donor initiatives is partly related to the field's degree of involvement in capital/HQ decision-making. No matter how interested donor representatives may be, not having much of an influence on capital/HQs decisions acts as a disincentive. This was brought up in the 2005 Lessons Learned on the Burundi pilot, which states that "One frustration with GHD is that much of what it advocates is beyond the in country donors' sphere of influence" (p.5). In addition, the GHD framework is of little relevance to those representatives for whom the main objective of donor interaction is information collection.

A few donor representatives in Geneva and the field indicated that some of the principles with relevance for the field –or parts of them– are already an integral part of the contract between donors and their partners (e.g. respect for international refugee law in PRM contracts or beneficiary participation in OFDA's contracts and DG ECHO's Framework Partnership Agreements).

Box 13: *Case study example from Bangkok and Yangon*

There were attempts to initiate a GHD meeting for Myanmar. However, various meetings and consultations with donors, both Yangon- and Bangkok-based, were already taking place to ensure aid effectiveness and greater donor coherence. For example since October 2008, UNCT under the leadership of the RC and together with the IASC have been organizing a bi-monthly donor meeting with both Yangon- and Bangkok-based donors. It was therefore concluded that a new donor-only meeting would not be needed.

A number of questions included in the field survey were meant to find out if donor representatives were applying some of the GHD principles or aspects of them. The answers are as follows. Almost all of the respondents to the field survey stated that they share funding intentions with other donors with a view to avoiding gaps across sectors (98%); discuss ways of ensuring that humanitarian aid is supportive of recovery and long-term development (97%); and promote the inclusion of disaster preparedness in humanitarian action / the CAP (94%). The big majority of respondents stated that as an individual donor they promote the involvement of beneficiaries in the project cycle (about 90%). 2/3 of those who replied to the field level questionnaire said that as an individual donor they would promote multi-donor needs assessments over single donor needs assessments.⁸⁰ A little over half of the respondents stated that they participate in the Consolidated Appeals process / CHAP formulation (54%).

⁸⁰ Some respondents to this question however clarified that they would promote joint assessments but that in general, assessments were not done very often or recently. Donors also stated that -although they promote multi donor assessments- they would still do single donor assessments themselves.

In addition, examples brought up during the field visits⁸¹ demonstrate both the interest among humanitarian experts for GHD/humanitarian principles and the complexity of putting some of them into practice at their level:

Humanity, impartiality, neutrality and independence (Principle 2):

In certain places humanitarian action supports the response to needs generated by counter-insurgency operations (e.g. in Karamoja in Uganda or the Ogaden in Ethiopia), which brings up questions about the principle of independence and neutrality of humanitarian action. These are controversial issues which donor representatives find impossible to act upon at field level.

Flexible and timely funding on the basis of the collective obligation of striving to meet humanitarian needs (General Principle 5): apart from the CHF in DRC and Sudan, which testify to the efforts being made by donors to allocate more flexible funding on the basis of need, there are indications that humanitarian experts occasionally try to mobilise their capital/HQ funding in complementary ways (e.g. according to the speed with which a funding decision can be taken by their respective capital/HQs).

Humanitarian funding in proportion to needs and on the basis of needs assessments (General principle 6 and Good Practice 12):

- In DRC, this is happening partly through the Humanitarian Action Plan (based on a common Needs Analysis Framework) and the CHF, which uses the HAP as the basis for its work.
- Several donor representatives in Geneva and the field stated that they often disagree with the needs analyses and requirements presented by the UN. A related issue is their view that sometimes what is presented as a humanitarian gap is due to structural or failed development causes and cannot be supported with humanitarian funding, even if morbidity and mortality indicators reach emergency thresholds. Some donors are more flexible than others.
- Many donor representatives in capital/HQs, Geneva and the field stated that the needs base for prioritising humanitarian action remains weak (e.g. assessments are not comprehensive enough, UN agencies still find it difficult to work together, the analysis of needs assessments is weak, etc).
- UN agencies and international organisations promote their work and programmes at the level of donor capitals/Headquarters, which generates a distortion in funding.

Beneficiary involvement (General Principle 7) is seen as standard operating practice by individual donors.

Disaster Risk Reduction (Principle 8): DRR is regarded as a priority in Bangkok and Colombia and a few donors are working on regional drought preparedness in East Africa (DG ECHO and US). DRR may be overshadowed by other humanitarian imperatives in other places, such as DRC.

Humanitarian assistance supportive of early recovery and long-term development (General Principle 9): Interest for providing humanitarian assistance supportive of early recovery and for

⁸¹ The research team did not do a comprehensive assessment of the use of all GHD principles during the visits, but in a couple of cases, when time allowed, the list of GHD principles was discussed in detail. The following list summarizes aspects that came up during interviews and meetings.

LRRD is growing among donors. Several donor representatives either combine development and humanitarian functions or work for their development agency, which is an advantage when the crisis country concerned stands among those prioritised internally for development support as there is potential for linkages in-house. The extent to which this internal process is successful is unclear. Meetings involving humanitarian and development donor representatives take place in Nairobi and Kinshasa at the initiative of the latter. In both places, several donor representatives brought up the difficulties stemming from the lack of a common definition of humanitarian aid (question of structural versus humanitarian causes of a situation) and Early Recovery and the debates around the type of activity that can be supported in the framework of the humanitarian mandate, which cause a loss of precious time and confusion.

Box 14: Example from DRC

A couple of stumbling blocks that hamper coordination efforts came up in DRC, namely the lack of a common definition of humanitarian aid and of its scope (issue of the humanitarian mandate of donors in cases where emergency thresholds have been reached and life-saving action would be needed but the crisis situation is due to structural, failed development causes) and of Early Recovery and the type of activity that can be supported with humanitarian funds. The GHD group worked hard to ensure that the Humanitarian Action Plan for 2009 included a separate Early Recovery objective (included as “relèvement communautaire”) so as to facilitate (separate) support for humanitarian aid and for Early Recovery. This is a problem of donor mandate and institutional division of labour, although some donors are more flexible than others. SIDA for instance can support some early recovery activities with their development budget while Japan does not have a clear-cut distinction of humanitarian and development activities.

The **central role of the UN and the vital role of the UN, the Red Cross family and NGOs** (General Principle 10) **and funding the CAP** (Good practices – Funding – Principle 14) are recognised principles, but this is also where donors play a useful “checks and balances” function.

Most donor representatives expressed satisfaction with the Common Humanitarian Action Plans (and similar documents such as the HAP in DRC). However, several donor representatives in Nairobi complained about the poor quality of projects included in the CAPs. OCHA representatives in Geneva stressed the need for feedback from donors to the IASC/HCT once the CAP is launched. More generally, both Geneva and DRC mentioned the importance of donors communicating their views on UN-driven processes and products, rather than expressing them through their funding decisions.

Offer support to the implementation of humanitarian action, including the facilitation of safe humanitarian access (Good practices – promoting standards and enhancing implementation – Principle 17): In Sudan in particular, the Humanitarian Donor Group has taken an active role in eliciting, supporting and shaping diplomatic action at Heads of Mission, capital/HQ, and international (i.e. New York meeting) levels following the expulsion of INGOs in March. The group has taken a key initiative, to be considered as good practice, to promote coherence among donors at all levels through a regularly updated “core script” for donors to use as a basis for their positions and messages.

5. Main conclusions and recommendations

5.1 Humanitarian donor presence in the field

Conclusion 1

With the exception of Somalia, at least three GHD donors have a presence in the humanitarian crises for which a UN HC has been designated and at least ten do in the largest crises (e.g. Afghanistan, DRC, and Sudan).

However, except for DG ECHO, the UK and the US, which deploy full-time humanitarian experts, most donor countries rely principally on Foreign Affairs staff involved only part-time in humanitarian affairs, who do not have humanitarian expertise and who have other equally important functions and responsibilities. Donors are unlikely to increase their humanitarian capacities in the field in the near future, except perhaps for a couple of them. This should be taken into account when donor coordination practices are discussed and changes or new mechanisms proposed.

All donors acknowledge that having a humanitarian capacity in the field presents an advantage in terms of contextual analysis, coordination, relations with partners, programming, project cycle management, and representation, for which donors with humanitarian expertise on the ground have a comparative advantage over those whose representatives have limited capacity to participate in humanitarian coordination arrangements and whose priority is complying with multiple internal demands.

Recommendation 1

Given the current limited capacity, donor representatives in the field, with full-time humanitarian expertise or not, should attempt to make the most of their collective capacity by pooling expertise, knowledge, and resources to the benefit of the group. The smaller the group and more limited the capacities of donor representatives, the more useful this may be in the face of the coordination requirements and activities taking place. The group should envisage systematically sharing information and briefing each other on their field visits, dividing up the burden of attending regular meetings (e.g. clusters, as is currently being envisaged in Sudan) or participating in joint needs assessments, monitoring project implementation, leading on specific issues, etc.

Conclusion 2

Even though most donors have no plans to step up their presence in the field, commitments made within the framework of GHD (and the European Consensus for Humanitarian Aid in the case of EU Member States) suggest the need for more active donor coordination at the field level. Several donors of Group 2 already exceptionally deploy staff to crisis countries.

Recommendation 2

Major donors to a crisis who do not have a full-time presence should consider engaging more actively in the field by deploying a full-time humanitarian expert, at least in a few priority countries. This would improve their own decision-making base and enable them to take part in

country-level humanitarian coordination. Complex humanitarian crises with less than three full-time humanitarian experts should be given special consideration for such deployments.

5.2 Humanitarian donor coordination in the field

Conclusion 3

IASC/Humanitarian Country Team-led coordination mechanisms exist in almost every humanitarian context and are a clear example of good practice, even if in most places their focus is information-sharing or perceived as such. Most donors find them useful, especially those of Group 2.

These are usually completed on a monthly basis by meetings of the IASC/HCT with donors, which bring donors together who may otherwise not interact. Nevertheless, there is a need for donors to better communicate as a group with other humanitarian actors. Donor feedback at the IASC/HCT tends to be uncoordinated (but not always).

Recommendation 3

IASC/HCT-led coordination mechanisms are one of the generic models recommended by this study for all types of situations (sudden-onset emergency, complex and protracted emergency, etc). This model is consistent with GHD Principle 10 and should exist in every humanitarian situation as the forum for broad-based information-sharing and consultation among humanitarian actors.

Donors should ensure that the IASC/HCT always includes in its coordination framework a coordination meeting with donors on a monthly or six-weekly basis as a minimum, where the full range of humanitarian issues can be discussed.

Conclusion 4

Donor-only humanitarian coordination arrangements exist in every country but under a different form in each. The common denominator across countries is that humanitarian donor representatives coordinate informally, either as a small group or bilaterally. This is particularly true for the three big donors – DG ECHO, DFID, and the US, but it is not systematic.

Donor-only formal humanitarian coordination mechanisms are the exception rather than the rule. Even though several donor representatives at field and capital/HQ levels do not see the need for a donor-only coordination forum, donor representatives who take part in such meetings highly value having a forum reserved to them as a specific group of peers with its particular needs and as a way to strengthen their capacity to play a “checks and balances” function in the broader humanitarian configuration.

As stated in the Danish government note to promote GHD at the field level, “Experience in development cooperation suggests that where donors work together to harmonise their procedures and to align with recipient country governments’ procedures it is more effective”. Depending on the humanitarian context, alignment would be with the government and / or with the UN-led Common Humanitarian Action Plan.

Recommendation 4

Humanitarian donor representatives in all field locations, and in particular those where there are only a few donors and a difficult working environment, should step up efforts to coordinate, both informally and formally, and in the case of the latter, in an all inclusive way.

The “group of three” should systematically link up and act as a driving force for broader-based, regular donor coordination (another generic model for this study) involving all GHD donors supporting the humanitarian response, including whenever possible major non-GHD donors. At their request, donors without a presence in-country should receive a copy of a short summary note on the meetings from the chairperson, by e-mail.

The establishment of donor-only coordination arrangements should be encouraged and facilitated by capitals/HQ, including by the allocation of extra financial or human resources if required, for instance in emergency situations where the capacities of humanitarian representatives are stretched to the limit.

One of the tasks of the donor-only forum would be to prepare for the regular meetings with the IASC/HCT⁸².

Conclusion 5

The GHD initiative has encouraged donors to promote donor coordination in the field (e.g. DRC and Sudan) but without a clear view of what donor coordination was meant to achieve and how the field could assist with fulfilling their GHD commitments. The advantages of having a donor coordination group may be underexploited.

In addition, no matter how much financial support is given, the effectiveness and the quality of aid are conditioned by the capacities of the humanitarian actors, the tools and methodologies in place and the functioning of the humanitarian coordination architecture (e.g. Chad). These underlying systemic issues would benefit from more attention from donors as a group.

Recommendation 5

Donors should clarify their expectations as to the objectives of coordination in the field and its limits. In this respect, one recommendation is that those donors who have more capacity in the field look together beyond operational matters into the capacities, tools and methodologies in place and recommend action where required to ensure that the necessary conditions for aid effectiveness exist, while linking up with broader-based donor coordination.

Conclusion 6

The success of existing donor-only coordination frameworks is largely due to the fact that they are adapted to the country’s context and the donors’ capacities. They are formal enough to be effective (e.g. existence of a chairperson, regular meetings) but informal enough to allow for open discussions and to accommodate the participants’ time constraints.

The skills and personality of their chairperson (humanitarian expertise, good communications and leadership skills, personal commitment) are an important factor of success together with a

⁸² This is one of the suggestions of the Danish guidance note for colleagues at the country level: “*In addition to donor-only meetings, it is useful for donors to plan to meet regularly with the Humanitarian coordinator and the IASC country team to communicate the main issues emerging from inter-donor consultation.*”

degree of autonomy of the chairperson vis-à-vis their capital/HQ to engage with the HC, UN agencies and other stakeholders at senior level on behalf of the donor group.

Chairing and organising donor meetings requires time and commitment, especially in emergency situations. Chairpersons would benefit from having technical assistance to fulfil this function.

Recommendation 6

Donor coordination frameworks should be adapted to a country's context. The form and periodicity of meetings should be agreed upon by donor representatives on the basis of need, capacities and coordination mechanisms in place. The periodicity should not be longer than every two months in order to avoid disconnects and discontinuity.

The chairperson should ideally combine the skills described above and enjoy support from capital/HQ level to perform with a certain degree of autonomy. A rotational system for the Chair should be envisaged in the spirit of burden-sharing and agreed upon from the start. As suggested by the Danish guidance note, the calendar of the meetings would need to “coincide with key points in the planning cycle, such as preparation of the CHAP, the launch of the CAP and the mid-term review.”

Where appropriate, the allocation of resources to support active donor coordination (for example, to provide a secretariat) should be considered.

Conclusion 7

Donor field representatives are often confronted with issues related to the broader context (e.g. government policies; lack of access) or the humanitarian architecture in place (UN-system problems due to mandate, leadership, coordination, capacity, etc.), which hamper or endanger the humanitarian response and cannot be resolved at country level. In some locations there is a need to create closer linkages between the field, HQ and places where joint advocacy is possible (NY, Geneva).

Recommendation 7

In countries where the number of donor representatives does not enable them to reach a critical mass and countries where deep-seated problems affect the performance of the humanitarian community as a whole, donor representatives should consider involving their counterparts at capital/HQ level and Geneva, as long as they have clear and realistic objectives.

5.3 Putting GHD into practice at the field level

Conclusion 8

Many donor representatives have pointed out that GHD is an aspiration. Most humanitarian donor representatives in the field are aware of the GHD initiative and principles, some of which are already mainstreamed into their work, but they do not perceive them as a useful framework for collective action at the field level. This is because several of them cannot be acted upon at the field level, the meaning and operational scope of others are open to interpretation or limited by donor mandates, and no guidance exists on how to put them into practice.

However, it is the only framework in place for encouraging better (humanitarian) donor behaviour and accountability, individually and collectively, apart from the European Consensus on Humanitarian Aid. As such and despite the pervasive feeling in the field that it is a capital/HQ-driven process, it should be considered as a key reference by donor representatives anywhere.

Recommendation 8

To donor representatives in the field: donor coordination frameworks should endeavour to identify the GHD principles of greatest relevance in their context, examine how they could be put into practice and what stumbling blocks need to be resolved at capital/HQ level. The GHD principles could also be used as a checklist against which to periodically review the context and a ways of detecting areas in need of improvement both in their own and their partners' practices.

To donor capitals/HQ: if donor representatives in the field are to play a proactive role in applying GHD principles, donors need to identify which ones can and should be acted upon at the field level and develop guidance for each one of them. Donors should consider establishing a network of field representatives with humanitarian expertise and of capital/HQ staff, including from the policy departments, willing to engage in identifying the GHD-related issues (rather than principles) of most relevance to the field and the most frequent difficulties encountered when putting them into practice.

At a later stage, once the role of field representatives for putting GHD into practice has been clarified, donors should consider referring to it in their domestic implementation plans or strategies.

Conclusion 9

Awareness of GHD varies widely at the field level and a need for guidance was expressed. Existing guidance is rarely used at present. Similarly, the scope and depth of the training provided varies significantly from donor to donor.

Recommendation 9

Donors should ensure that guidance for field representatives is developed and made available to them. The GHD website, for example, could be kept updated and used as a repository of all GHD-related information, and linkages to it could be posted on GHD donor websites. In addition, donors should consider providing more training opportunities and appointing GHD focal point(s) who can be contacted for advice by field representatives.

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