

A PEOPLE-CENTERED APPROACH

Practical guide to advancing quality, inclusive and accountable cluster coordination for UNICEF-led/co-led clusters and area of responsibility

Acronyms

AAP	Accountability to Affected Populations	HRP	Humanitarian Response Plan
AoR	Area of Responsibility	IASC	Inter-Agency Standing Committee
CLA	Cluster Lead Agency	INGO	International Non-Governmental Organization
CLARE	Cluster Lead Agency Role Evaluation	LNAs	Local and National Actors
CoP	Centrality of Protection	NNGO	National Non-Governmental Organization
CSOs	Civil Society Organizations	OPDs	Organizations of Persons with Disabilities
CFRMs	Complaints, Feedback and Redressal Mechanisms	PSEA	Protection from Sexual Exploitation and Abuse
FGDs	Focus Group Discussions	SADDD	Sex, Age and Disability Disaggregated Data
GBV	Gender-Based Violence	SAG	Strategic Advisory Group
HC	Humanitarian Coordinator	TWG	Technical Working Group
HCT	Humanitarian Country Team	WLOs	Women-Led Organizations
HDP	Humanitarian Development Peace (Nexus)	WROs	Women's Rights Organizations
HPC	Humanitarian Programme Cycle	WASH	Water, Sanitation and Hygiene
HNO	Humanitarian Needs Overview		

This guide was commissioned by UNICEF following a recommendation within the 2021 Cluster Lead Agency Role Evaluation (CLARE II) - <https://www.unicef.org/evaluation/reports#/detail/18527/evaluation-of-unicefs-cluster-lead-agency-role-clare-ii>. It was developed by Social Development Direct - <https://www.sddirect.org.uk>, led by Katie Tong with support from Joanne Creighton, Naomi Clugston and Sophie Robinson

Purpose and rationale of this guide

Background

This practical guide is the result of a key recommendation of the UNICEF Cluster Lead Agency Role Evaluation (CLARE II). It is intended to support dissemination of guidance on specific cross-cutting policy commitments by bringing them together in a more coherent and easily accessible format for clusters.

UNICEF has held the role of Cluster Lead Agency (CLA) since the introduction of the cluster approach in 2005. UNICEF leads the Nutrition, Water, Sanitation and Hygiene (WASH) clusters, and Child Protection Area of Responsibility (AoR), and co-leads the Education cluster with Save the Children International.

In 2013, UNICEF conducted its first evaluation of its Cluster Lead Agency Role (CLARE). The evaluation reviewed how well UNICEF was carrying out its CLA responsibilities and provided recommendations toward further

strengthening this role in the future. Since 2013, there have been fundamental shifts in the humanitarian landscape, including a sharp increase in both the complexity and the protracted nature of conflicts and reasons for displacement. This has been combined with an overall increase in displacement, exacerbated by various mega-trends¹ including climate change, emerging and frontier technologies, demographic changes, inequalities, and urbanization, all of which substantively impact humanitarian situations.

The cluster² approach has continued to evolve in response to these trends and, as such, UNICEF commissioned a second evaluation of its CLA role, CLARE II, in 2022.

The first overarching recommendation from CLARE II stated that:

“UNICEF should embrace, promote and operationalize the understanding that its work for children in humanitarian settings is even more effective when carried out on behalf of, and together with, the collective of actors.”³

This overarching recommendation was nuanced into multiple, actionable sub-recommendations, one of which was that:

“UNICEF should provide clear direction on how the clusters it leads should implement and prioritize the four policy commitments (Centrality of Protection (CoP), Accountability to Affected Populations (AAP), humanitarian-development-peace (HDP) nexus and localization) in addition to other institutional commitments such as those relating to disabilities and Gender-Based Violence (GBV). UNICEF should ensure systematic dissemination of relevant guidance to all staff.”

This Practical Guide is the result of this specific sub-recommendation.

Target audience

This guide is intended for cluster coordination teams in contexts where clusters have been activated. The primary audience is cluster teams across the four UNICEF-led/co-led clusters and AoR, at the national and sub-national level. It has been developed for all four clusters/AoR and is not disaggregated into specific actions for each, as actions to address the cross-cutting concerns are largely common across the clusters/AoR.

The practical guide is also useful for Chiefs of Field Operations and Emergency Focal Points in contexts where clusters are not yet activated and during preparedness processes. In these contexts, the guidance may be used, for example, to inform preparedness actions and to contribute to the conceptualization of a people-centered approach and how this applies in humanitarian action.

Purpose and framing of the guide

Relevant policies and guidelines released over the years have raised awareness within the humanitarian and development community about the collective responsibility to address policy commitments and integrate cross-

cutting issues to further reinforce a people-centered approach that places the rights, needs and voices of affected populations in all their diversity at the center of humanitarian action. However, insufficient resources and

fragmented guidance have created a sense of overwhelm and fatigue among humanitarian actors and field coordination teams. This has hindered efforts to address these concerns as an intrinsic part of humanitarian response design and delivery.

Building on achievements and good practices, this guide aims to provide a coherent approach to advancing these commitments by integrating existing guidance on each policy commitment and applying this specifically to cluster coordination roles and responsibilities. That is, ensuring that humanitarian actors within the cluster system and beyond are held accountable to affected populations by using an intersectional lens⁵ to identify and respond to the needs, capacities and risks of the affected population in all their diversity, and enabling the participation and leadership of affected populations and their representative organizations.

This practical guide covers two key UNICEF policy commitments for humanitarian response and four key Inter-Agency Standing Committee (IASC)-mandated cross-cutting issues:

IASC-mandated:

**CENTRALITY OF PROTECTION (COP)**

**ACCOUNTABILITY TO AFFECTED POPULATIONS (AAP)**

**WORKING ACROSS THE HUMANITARIAN DEVELOPMENT PEACE (HDP) COLLABORATION**

**LOCALIZATION**

UNICEF:

**GBV RISK MITIGATION**

**DISABILITY INCLUSION**

EXISTING GUIDANCE ON ADDITIONAL ISSUES:

- [Gender equality](#)
- [PSEA](#)
- [Engaging with adolescents and youth](#)

A NOTE ON TERMINOLOGY

This guide uses the term ‘quality, inclusive and accountable approach’ to align with the Cluster HNRP template in the OCHA HPC Guidance.⁶ For the purpose of this guidance, this approach is understood to be consistent with a ‘people-centered approach’ to humanitarian response, which is increasingly being used in global dialogue. It is recognized that various terminology is currently being used to refer to similar concepts described in this section. Rather than advocating for a specific terminology, it is the intention of this guidance to address the substantive aspects of how such an approach is applied in cluster coordination.

These issues all contribute to the delivery of a quality, inclusive and accountable approach in humanitarian coordination centered on the needs and rights of people in crisis.

A variety of other cross-cutting issues are equally relevant for the coordination of effective humanitarian response, including gender, Protection against Sexual Exploitation and Abuse (PSEA), and adolescent and youth

engagement. These issues are not addressed in this specific guide due to the focus on the CLARE II evaluation recommendation, but their inclusion is an important next step.

This guide is intended as a living document and will be further expanded and refined based on lessons learned and pilots planned in a few countries in 2025.

THE PRACTICAL GUIDE IS FRAMED AROUND THE SIX CORE FUNCTIONS FOR CLUSTER COORDINATION:



To uphold the cluster system’s central tenets of predictability, accountability and partnerships, this guide aims to:

Support all UNICEF-led and co-led clusters and AoR in developing a consistent approach to integrating policy commitments and cross-cutting issues in a holistic manner.	PREDICTABILITY
Contribute to ensuring that responses across UNICEF-led and co-led clusters and AoR are fully people-centered.	ACCOUNTABILITY
Ensure that all cluster members, and particularly local and national actors (LNAs), can access technical resources to work jointly on advancing policy commitments and cross-cutting issues in cluster coordination.	PARTNERSHIPS

How this guide is structured:

This practical guide provides ‘jump-in-jump-out’ guidance organized by cluster core function.

Section one provides the ‘what’ and the ‘why’. It offers an overview of the purpose and rationale behind the guide; the target audience; objectives; limitations; and implementation guidance.

Section two is the ‘how’. It is divided per core function and includes key actions that address multiple policy and cross-cutting issues.

Annexes provide an overview of how each of the policy commitments and cross-cutting issues link to each other, as well as reference resources for further reading.

SECTION TWO

How to mainstream a quality, inclusive and accountable approach across the six core cluster functions

The **'how'** of guidance on a quality, inclusive and accountable approach is organized by core cluster function. Only the original six core cluster functions are presented, as AAP – the additional core cluster function – is addressed as a cross-cutting issue against all the original six core cluster functions.⁷

Under each cluster function, key actions for each core cluster function are outlined, addressing in a combined manner various elements of quality, accountability and inclusiveness related to cross-cutting issues of CoP, AAP, HDP nexus, localization, GBV risk mitigation, and disability inclusion.

The UNICEF practical guide does not intend to duplicate comprehensive guidance for all these different issues. Each cluster should, based on context, funding, and other factors, refer to the expert guidance for each particular cross-cutting issue when feasible and appropriate.

If clusters implement these key actions per core function, all policy and institutional commitments and cross-cutting issues will be addressed to standard. Clusters can decide how best to integrate more specific and in-depth actions across each of the policy and institutional commitments and cross-cutting issues, based on context, funding, staffing, expertise, and other relevant factors.

Quick activity cross-check reference table

The table below provides a quick reference of actions and activities and relevant key actions in the guide.

ACTION/ACTIVITY	RELEVANT KEY ACTIONS
Developing a cluster strategy	1.1, 1.2, 1.4, 2.2, 2.3, 3.1, 3.2, 5.1, 5.3
Conducting a needs assessment	1.1, 1.2, 2.2
Developing a Humanitarian Needs Overview (HNO)/Humanitarian Response Plan (HRP)	1.1, 1.2, 1.3, 1.4, 2.2, 2.3, 4.3
Organizing/running a cluster or AoR/sub-cluster meeting	1.3, 2.1, 4.1, 4.2
Creating a Strategic Advisory Group (SAG) or Technical Working Group (TWG)/recruiting SAG or TWG members	1.4, 2.3, 4.2, 5.1, 5.2
Running a country-based pooled fund/funding expression of interest	1.4, 2.3, 5.1, 6.1, 6.4

Core functions and relevant key actions

All key actions below must be implemented through a participatory approach with affected populations and in partnership with local and national actors:

PARTICIPATION:

- Ensure participation is safe, accessible and inclusive of the most marginalized groups in the population, such as women and girls, persons with disabilities, indigenous and minority groups.
- Advocate with donors and allocate a budget for safety and accessibility to enable inclusive participation.

PARTNERSHIP:

- Map and partner with local and national actors (LNAs), including those representing marginalized groups, such as Women-led

Organizations, Organizations of Persons with Disabilities (OPDs), youth-led networks and other diversity groups.

- Ensure cluster activities and communication are inclusive. Regularly review and invite feedback from cluster partners on accessibility and inclusiveness.
- Encourage national and local actors to participate in SAGs, TWiGs, advisory boards, review committees, and cluster leadership by addressing barriers such as safety concerns, meeting access, timing and language. This includes avoiding jargon in all cluster documents and communications.
- Advocate for donor funding to strengthen participation, including through capacity strengthening, accessibility and translation, and other support.

CORE FUNCTION 1

Support service delivery

KEY ACTIONS:

- 1.1 Ensure that meaningful engagement with different segments of the community is ongoing, to identify, understand and support their own priorities and protection measures.
- 1.2 Monitor access to services for all population groups to identify and address barriers
- 1.3 Review and discuss feedback from affected populations regularly to develop collective solutions
- 1.4 Ensure meaningful participation and leadership of local and national partners in service delivery

Support service delivery by: (a) providing a platform that ensures service delivery is driven by the Humanitarian Response Plan and strategic priorities; and (b) developing mechanisms to eliminate duplication of service delivery.

Support partners in conducting focus group discussions and key informant interviews with diverse population groups to inform needs assessments and protection analyses, ensuring safety and accessibility.

Ensure inclusive and safe feedback and complaint mechanisms.

Develop participatory evaluation processes, prioritizing safety, accessibility and community leadership.

Support partners in conducting safety and accessibility audits to identify barriers to service access.

Support partners in defining interventions to address barriers faced by diverse and marginalized groups.

Ensure evaluations consider service access for marginalized and at-risk populations.

Analyse feedback and complaints to identify key themes, including safety and accessibility for groups facing barriers.

Ensure strategic planning is guided by feedback from diverse affected populations.

Include a standing agenda item in cluster meetings to discuss feedback, address complaints, propose solutions and track responses.

Prioritize service delivery led by local and national actors during the project vetting process, providing training on proposal development when needed.

Ensure response-tracking databases collect data on partners, disaggregated by organization type (e.g., UN agency, INGO, NNGO, CSO). Analyse data to understand the roles of LNAs, their locations, and funding recipients.

CORE FUNCTION 2

Inform strategic decision making

Inform the HC/HCT's strategic decision making by (a) preparing needs assessments and analysis of gaps (across and within clusters, using information management tools as needed) to inform priorities; (b) identifying and addressing emerging gaps, obstacles, duplication and cross-cutting issues; and (c) formulating priorities based on analysis.

KEY ACTIONS:

- 2.1 Include discussion on a quality, inclusive, and accountable approach in all cluster and SAG meetings, applying this approach to decision making across the HPC
- 2.2 Prepare needs assessments to identify, prioritize, and understand specific risks and their root causes, conducting joint analysis with development partners when appropriate, to inform strategic planning
- 2.3 Facilitate participation of LNAs in cluster strategic decision making and HNO/HRP process

Review gaps and priorities in relation to safety, accessibility, two-way communication with and participation of affected populations, and engagement of local actors.

Discuss protection risks and concerns experienced by diverse and particularly vulnerable groups, as identified through assessments and feedback and complaints.

Design assessment tools and processes to collect and analyse sex, age and disability-disaggregated data.

Include questions to identify barriers to accessing assistance, local capacity, protection concerns, risks and solutions, information needs and preferred feedback/complaint mechanisms.

Provide all assessment results to the community in accessible formats, including information on potential next steps.

Invite local and national partners to pre-HNO/HRP induction meetings, HNO kick-off workshops, Joint Intersectoral Analysis Framework (JIAF) groups and validation workshops, especially women or youth-led organizations and Organizations of Persons with Disabilities (OPDs).

Capture needs and challenges for LNAs in the HNO/HNRP, especially institutional capacity gaps.

CORE FUNCTION 3

Planning and implementing cluster strategies

Plan and implement cluster strategies by: (a) developing sectoral plans, objectives and indicators that align with the response's strategic objectives; (b) applying and adhering to common standards and guidelines; and (c) clarifying funding requirements, helping to set priorities and agreeing upon cluster contributions to the HC's humanitarian funding proposals.⁸

KEY ACTIONS:

- 3.1 Ensure inclusion and protection of affected and at-risk populations is part of the cluster and AoR strategies
- 3.2 Work with communities and local and national actors to assess readiness for collective outcomes⁸ and identify possible sector entry points



Support partners in identifying at-risk groups and intersectional vulnerabilities, including sex, age, disability, gender identity, sexual orientation, ethnicity, religion, linguistic and indigenous status, and other factors.

Analyse protection risks, needs and priorities of diverse groups. Outline actions to address these risks and priorities and barriers to safety and accessibility.

Prioritize funding for resources that meet the needs of at-risk groups, including actions to address protection risks and accessibility concerns. Disaggregate indicators to measure the satisfaction of affected populations by sex, age and disability.

Ensure all relevant cluster plans and strategies are translated into national and local languages and made available in accessible formats, including written translations for documents and verbal interpretation for meetings.

Identify 1–3 priority collective outcomes or long-term needs requiring solutions beyond humanitarian action, along with the partnerships needed to achieve them.

Analyze underlying factors and root causes of need, and conduct a readiness assessment for achieving collective outcomes.



CORE FUNCTION 4

Monitoring and evaluating performance

KEY ACTIONS:

- 4.1 Monitor and adjust access to services by different population groups, where necessary
- 4.2 Raise awareness of Protection from Sexual Exploitation and Abuse (PSEA) commitments, codes of conduct, and reporting mechanisms among members, linking to the Inter-Agency PSEA Action Plan (if available) and the IASC PSEA core indicators
- 4.3 Disaggregate indicators by sex, age, disability, and other relevant vulnerability factors to monitor the inclusiveness of responses throughout the programme cycle

Monitor and evaluate performance by: (a) monitoring and reporting on activities and needs; (b) measuring progress against the cluster strategy and agreed results; and (c) recommending corrective action where necessary.



Encourage partners to conduct FGDs, safety and accessibility audits, and other activities to gather feedback on service access from vulnerable, excluded and marginalized groups.

Routinely discuss accessibility issues during cluster meetings.

Conduct regular PSEA training sessions for all partners and provide access to online training, such as the UNICEF-led joint UN PSEA online course. Monitor training uptake and outcomes.

Identify specific indicators to monitor safety, accessibility and participation of affected populations.

Train partners on collecting disaggregated data using globally recognized tools.

Ensure that 5Ws (or other response-tracking databases) collect data disaggregated by sex, age and disability (SADDD) to identify gaps in service access



CORE FUNCTION 5

Strengthening national capacity in preparedness and contingency planning

KEY ACTIONS:

- 5.1 Include a clear commitment in cluster strategies to support national and local partner capacity, emphasizing their critical role in protection, inclusion and GBV risk mitigation
- 5.2 Strengthen cluster membership by including partners identified in the collective outcome strategy, fostering their engagement where appropriate
- 5.3 Develop strategies to enhance the role of local and national actors in collaboration with humanitarian, development and peace actors, where appropriate



Work with local and national partners, including OPDs and WLOs, to identify their capacities, needs and priorities.

Incorporate actions addressing local and national partners' needs and priorities into strategic planning and resource mobilization.

Include indicators in monitoring frameworks and gather partners' feedback on the impact of capacity-strengthening initiatives.

Invite partners working across the nexus, including those not strictly humanitarian, to participate in cluster meetings.

Ensure local and national actors, particularly representative organizations (including YLOs, WLOs and OPDs), can contribute to cluster strategies to prioritize actions for collective outcomes, focusing on strengthening national, sub-national and local systems.



CORE FUNCTION 6

Supporting advocacy

Support robust advocacy by: (a) identifying concerns and contributing key information and messages to HC and HCT messaging and action; and (b) undertaking advocacy on behalf of the cluster, cluster members, and affected people.

KEY ACTIONS:

- 6.1 Advocate for donor funding to provide resources for cluster partners to plan and deliver a quality, inclusive and accountable response
- 6.2 Ensure key issues and concerns regarding quality, inclusion and accountability are raised to the HC and HCT
- 6.3 Collaborate with development actors and sector counterparts at various government levels, where appropriate, to share cluster learning and experiences on protection and inclusion of the most vulnerable groups
- 6.4 Create opportunities for local and national actors, including WLOs and OPDs, to interact with in-country donors to increase visibility

Identify actions and costs for a quality, inclusive and accountable response, including safety and accessibility in all assessment and community engagement activities; addressing service access barriers; mitigating GBV risks; capacity strengthening, accessibility, translation, and other support for increased participation of local and national actors; and implementing safe and accessible complaint and feedback mechanisms.

Ensure funding criteria for country-based pooled funds reflect commitments to safe, inclusive, localized and accountable responses, with adequate representation of local and national actors on pooled fund advisory boards and other donor governance mechanisms.

Encourage cluster members to advocate for similar budget lines in project proposals to their donors.

Establish mechanisms for ensuring affected people's voices will be collected, heard and integrated into advocacy efforts.

Share the concerns and priorities of marginalized and vulnerable groups, as heard through field monitoring and feedback mechanisms, with HC and HCT for higher-level action as needed.

Advocate for peer review and evaluation processes that assess how decision-making bodies in cluster coordination, HCT, and other mechanisms address key issues related to quality, inclusiveness and accountability.

Map development and national actors that can support and promote equality and equitable access to local and national services.

Work with identified actors to enhance equality and equitable access through national, local, and customary laws, policies and practices.

Leverage the influence of cluster coordinators to advocate for pooled funding allocations to local and national actors, including costs for co-ordination leadership roles.

Advocate for donor funding to support meaningful and sustained cluster membership of local and national actors.

How policy commitments and cross-cutting issues link

The purpose of this practical guide is to help cluster coordination teams implement key actions, which address multiple policy commitments and cross-cutting issues to ensure quality, inclusive and accountable responses.

All of the policy commitments and cross-cutting issues rely on the effective implementation of other commitments and issues for safe, accountable, inclusive and impactful programming. The tables below highlight how these commitments and issues interlink.

POLICY COMMITMENT / CROSS-CUTTING ISSUE

LINKS TO ALL OTHER COMMITMENTS AND ISSUES

COP:

For clusters, Centrality of Protection means protection mainstreaming, ensuring that clusters support members in regularly assessing and analysing protection concerns and risks, formulating specific protection objectives, and implementing concrete actions to address and monitor them.

All sectors should integrate CoP objectives into their operational planning/ response, in line with overarching protection strategies. CoP can only be operationalized if meaningful and genuine engagement with affected communities takes place, as understanding community perceptions of protection risks is essential to mitigating and addressing them. Recognizing power dynamics and the diverse perspectives within the community – such as those of women, men, adolescents, older persons, people with disabilities, LGBTQI persons, and other linguistic, religious, or ethnic minorities – is critical.

CoP is key to reinforcing collaboration between humanitarian and development efforts and connecting them with peacebuilding across the **HDP nexus**. A core aspect of this is system strengthening and engagement with state actors and de-facto authorities, which ensures equitable and protected access and is directly linked to inclusion and CoP. Furthermore, conflict-sensitive and social cohesion programming is crucial to working across the nexus and requires a strong foundation of inclusive protection activities.

Local and national actors have critical knowledge and experience in understanding community power dynamics and can provide key insights into how protection mainstreaming can be effectively implemented in the local context.

Without understanding GBV risks, specific vulnerabilities of women and girls, and power dynamics within communities, protection is incomplete. Therefore, **GBV risk mitigation** is an important component of protection mainstreaming.

Inclusion and recognition of heightened risks faced by specific groups – such as those with physical, mental, intellectual, or sensory **disabilities** – is a basic and foundational tenet of protection mainstreaming.



AAP:

Each cluster member is responsible for **Accountability to Affected Populations**, ensuring that various community groups have means to express their priority needs, participate in shaping the humanitarian response, and raise feedback and complaints in a trusted, accessible and safe manner.

Engaging with communities and ensuring there is systematic two-way communication with affected populations, including complaint and feedback mechanisms, is integral to AAP. Population groups must be involved in identifying protection risks, so that appropriate measures are considered in response plans, as defined by the **Centrality of Protection**.

A key facet of working across the **nexus** is strengthening systems to ensure equal, equitable and inclusive access to services for all population groups. Assessing community-preferred communication channels is essential to scaling up AAP and facilitating effective and systematic communication.

Being accountable to affected populations means that local and national actors must maintain an ongoing presence in cluster coordination and other systems, with a say in the design, implementation, monitoring and evaluation of humanitarian response. The participation of various population groups, especially women and girls, is necessary to ensure their voices are heard and to provide them with an opportunity to report issues and concerns, including allegations of misconduct or abuse. In many contexts, women and girls lack the means to do so, making their participation crucial to the core of the response. Complaint and feedback mechanisms, which are a critical component of AAP as well as PSEA systems and **GBV risk mitigation**, should be accessible to all members of the community, including women, children and people with disabilities.

A **disability-inclusive lens** is central to effective and safe AAP systems. Considering specific communication requirements – including for those with physical, mental, intellectual or sensory disabilities – ensures better accessibility for all.

HDP Nexus:

Clusters are primarily established to respond to humanitarian crises, which remains their core mandate until deactivation. However, when opportunities arise to contribute to longer-term development, particularly through capacity building of local and national actors or increased access to funding, they should be pursued.

Centrality of Protection is key to reinforcing humanitarian and development collaboration and links to peacebuilding efforts. This relates both to system strengthening and conflict-sensitive and social cohesion programming, both of which require a strong foundation of inclusive and equitable protection activities.

AAP is critical to systems strengthening and ensuring equal, equitable and inclusive access to services for all population groups. By establishing strong AAP communication channels, different members of the community and vulnerable groups can voice their needs, which is key to conflict-sensitive programming and promoting social cohesion.

Localization is central to the nexus approach. Collaborating with national and civil society entities and fostering meaningful engagement and leadership, where possible, of local and national actors, is key to identifying, acknowledging and addressing root causes of humanitarian crises.

Working with local WLOs and women's rights organizations to mitigate **GBV risk** is crucial to humanitarian and development collaboration. Supporting, elevating and advocating for local women-led organizations and decision making has a sustained impact on peace, while further mitigating and reducing GBV risks.

Disability inclusion is strengthened through engagement across the HDP nexus, such as by engaging local and national disability actors and strengthening systems for inclusive service delivery.

Localization:

Meaningful engagement of local and national actors is critical for effective humanitarian coordination. Clusters should take steps to understand and address the barriers to their participation and leadership in coordination efforts by proactively reaching out to key actors and creating opportunities for decision-making roles.

Local and national actors – including state authorities of the affected aid recipient country, NGO forums and networks, WLOs and OPDs, development actors involved in response, academia, diaspora, private sector, and faith-based organizations – have critical knowledge and experience in understanding community power dynamics and provide key insights for effective protection mainstreaming in local contexts.

Localization supports the sustainability of **Centrality of Protection**, ensuring that protection mainstreaming activities undertaken during humanitarian crises have a better chance of becoming embedded in national systems when the crisis ends.

Developing capacities of LNAs to meaningfully engage in planning, implementing and monitoring humanitarian response is an important component of AAP, bolstering their role in coordination systems.

Localization is also key to the **nexus approach**, where collaboration helps in identifying, acknowledging and addressing root causes of humanitarian crises as well as response delivery.

Working with local WLOs and WROs contributes substantively to effective and sustainable **GBV risk mitigation** and risk reduction. These local groups can influence and drive change in their communities.

Localization, and specifically, the engagement of local civil society, including OPDs and national actors for **disability-inclusive programming**, helps ensure that disability-inclusive services and structures implemented during a crisis have an improved chance of becoming embedded in national systems when the crisis is over.

GBV Risk Mitigation:

Clusters are responsible for ensuring that all cluster members have a comprehensive understanding of the specific GBV risk mitigation measures, ensuring they are incorporated into interventions for safe and accountable programming. Clusters and sub-clusters are also responsible for promoting the use of the IASC GBV Guidelines.

Without a comprehensive understanding of GBV risks, specific vulnerabilities of women and girls, and power dynamics within communities, **Centrality of Protection** remains incomplete. GBV risk mitigation is a key component of protection mainstreaming.

Core elements of GBV risk mitigation, including strong gender and power analysis, is critical for effective and inclusive humanitarian responses and strengthens AAP.

We are accountable to affected people only when we understand the risks of the various groups and ensure they are taken into consideration in all stages of humanitarian response planning.

Working with local WLOs and WROs to achieve effective GBV risk mitigation is crucial within the **nexus**. Deliberate **localization** is also an essential element in the delivery of effective humanitarian programming.

Engaging **diverse local WLOs and WROs** in GBV risk mitigation activities and decision making, including women and girls with **disabilities**, is critical to effective programming and GBV mainstreaming. This is especially relevant as women and girls with disabilities are at heightened risk of GBV.

UNICEF is the designated lead agency for GBV risk mitigation, and global coordination takes place through the inter-agency, GBV Guidelines Reference Group.





Disability Inclusion:

All clusters are responsible for ensuring that partners understand the criticality of engaging persons with disabilities, which includes those with physical, mental, intellectual and sensory disabilities, reducing the risk of exclusion and finding entry points to ensure they take an active part in the humanitarian response.

Understanding the risks faced by populations in all their diversity – including persons with disabilities – is a basic and foundational tenet of **Centrality of Protection**. This includes identifying underlying factors, such as barriers to accessing assistance.

A disability-inclusive lens is also critical to effective **AAP** systems. Being accountable to all groups within the community, especially those facing barriers to inclusion like persons with disabilities, is central to safe and accountable programming. This requires an explicit and dedicated effort to ensure that all AAP mechanisms are accessible and inclusive.

Strengthening disability inclusion in a meaningful and sustainable way requires work across the humanitarian and development **nexus**, with humanitarian emergencies providing an important opportunity to build more inclusive systems.

Equally, **localization** and the meaningful engagement of local organizations of persons with disabilities, can ensure that more inclusive services and structures implemented during a crisis have a better chance of becoming embedded in national systems when the crisis is over.

Women and girls with disabilities are at heightened risk of GBV, therefore, ensuring that **GBV risk mitigation** activities are fully inclusive is fundamental. Engaging local OPDs in GBV risk mitigation is one key approach for strengthening inclusion.

Cash and Vouchers assistance (CVA)

While CVA is not a “cross-cutting issue”, there is growing evidence that the modality supports people-centered assistance, accountability and inclusion. Clusters are responsible for ensuring that their partners systematically consider CVA when developing sectoral plans, objectives and indicators that align with their response’s strategic objectives.

To make the best possible use of evidence and resources to advance cross-cutting issues, clusters should consider CVA, alongside other approaches when planning for people-centered and inclusive support. The Grand Bargain Workstream (3) enacted a caucus on **Cash coordination** that rests on a two-way engagement between the Inter-agency members, clusters and the cash working group. This policy is tied to the IASC Cash Coordination model, Guidance on Multipurpose Cash (MPC) section, and CVA for HNRPs. These policies, along with the Core Commitments for Children in Humanitarian Action (CCCs), are crucial policies to advance humanitarian action. They describe the minimum standards for planning, coordinating and reflecting assistance for people in need. From the outset, and to effectively reach and serve the most vulnerable, UNICEF-led and co-led Clusters and AOR are responsible for considering these requirements to attain objectives more effectively.

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Endnotes

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- 2 For the sake of conciseness, the term 'cluster' in this document should be understood to include AoRs.
- 3 UNICEF. CLARE II Evaluation. 2023. p.109. <https://evaluationreports.unicef.org/GetDocument?fileID=22654>
- 4 UNICEF. CLARE II Evaluation. 2023. p.110. <https://evaluationreports.unicef.org/GetDocument?fileID=22654>
- 5 Using an intersectional lens refers to proactively addressing the needs of affected populations in all their diversity by recognizing diverse ways in which discrimination and exclusion are shaped by gender, age, disability, ethnicity, and other factors, and by promoting participation and leadership of the most marginalized populations.
- 6 2025 HPC Toolbox available at [2025 HPC Toolbox – Humanitarian Programme Cycle](#)
- 7 See IASC, (2015). "Guidance. Cluster Coordination at Country Level." <https://interagencystandingcommittee.org/system/files/2020-11/Reference%20Module%20for%20Cluster%20Coordination%20at%20Country%20Level%20%28revised%20July%202015%29.pdf>
- 8 For an overview of Collective Outcomes, see IASC, 2020. "Policy. Light Guidance on Collective Outcomes." <https://interagencystandingcommittee.org/system/files/2021-02/UN-IASC%20Collective%20Outcomes%20Light%20Guidance.pdf>

