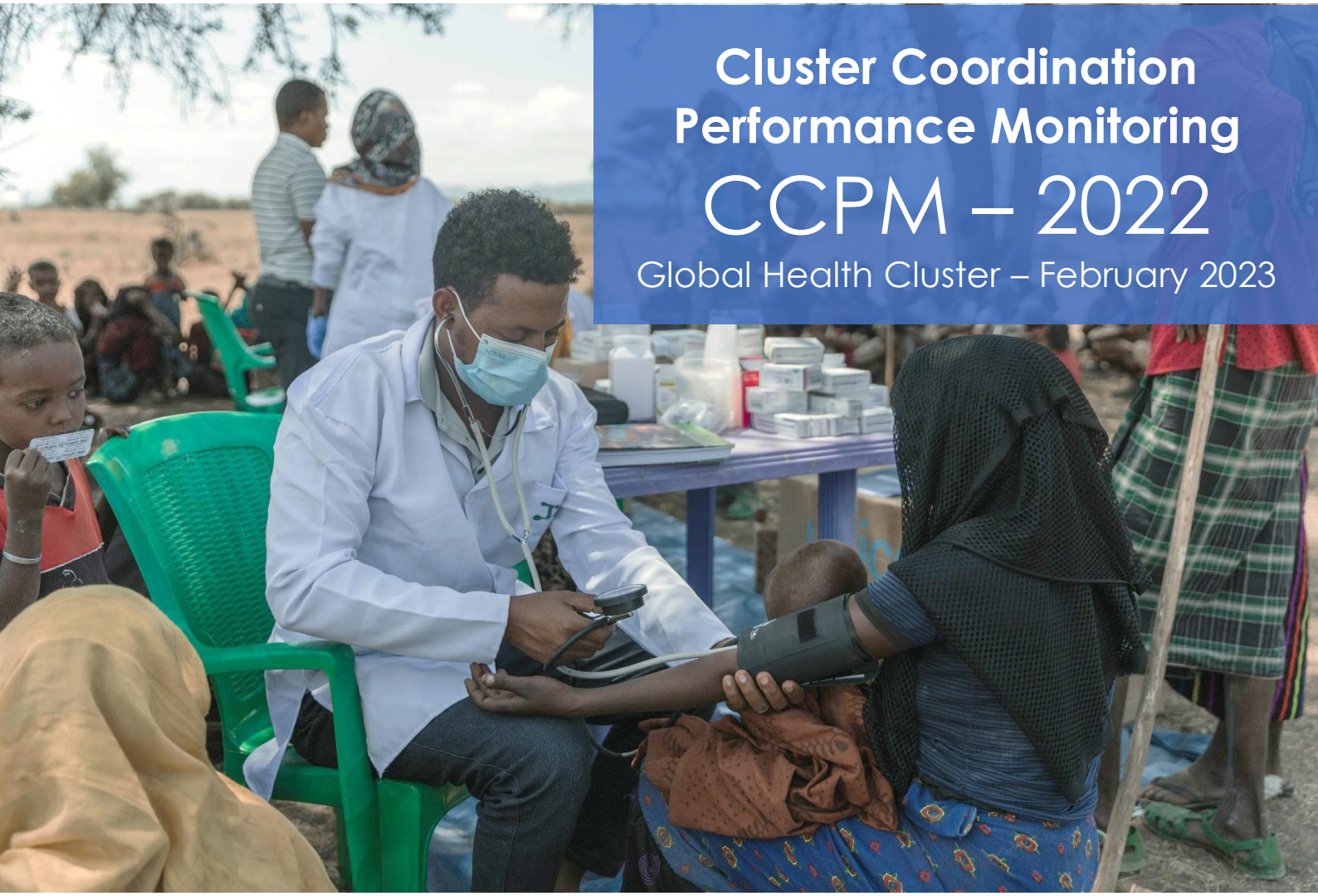

Cluster Coordination Performance Monitoring

CCPM – 2022

Global Health Cluster – February 2023

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Cover photo: ETHIOPIA: Impact of drought, floods and conflict on health - October 2022. On 19 October 2022, Medina and her 12-month-old son Siso are seen by Jemal Endris, a health officer who is part of the Eltomale Site Mobile Health and Nutrition Team in Chifra, Afar. WHO and partners are working to counter the consequences of malnutrition, respond to disease outbreaks and ensure that essential health services can continue.
Photo: WHO / Martha Tadesse

Contents

ACRONYMS

- **AAP** Accountability to Affected Populations
- **CCPM** Cluster Coordination Performance Monitoring
- **CPQ** Cluster Performance Questionnaire
- **GBV** Gender-Based Violence
- **GHC** Global Health Cluster
- **GHO** Global Humanitarian Overview
- **HC** Health Cluster
- **HCC** Health Cluster Coordinator
- **HCT** Humanitarian Country Team
- **HNO** Humanitarian Needs Overview
- **HPC** Humanitarian Program Cycle
- **HRP** Humanitarian Response Plan
- **IASC** Inter-Agency Standing Committee
- **IMO** Information Management Officer
- **INGO** International Non-Governmental Organization
- **NGO** Non-Governmental Organization
- **PHIS** Public Health Information Systems - Standards
- **UN OCHA** United Nations Office for the Coordination of Humanitarian Affairs
- **WHO** World Health Organization

WHO regional offices

- **AFRO** African Region
- **AMRO** Region of the Americas
- **SEARO** South-East Asian Region
- **EURO** European Region
- **EMRO** Eastern Mediterranean Region
- **WPRO** Western Pacific Region

ACKNOWLEDGEMENTS

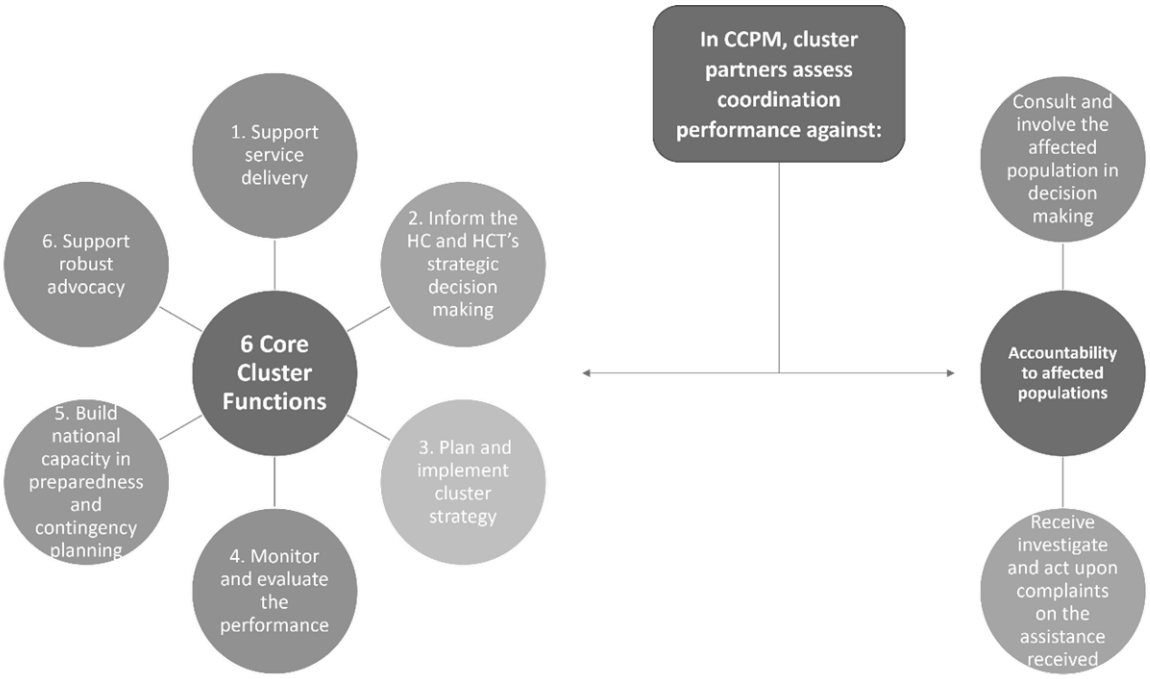
The Global Health Cluster team gratefully acknowledges inputs to the Cluster Coordination Performance Monitoring during 2022. We express our sincere thanks to the Health Cluster international and national partners and their focal points for having taken the time to complete the surveys, to the Health Cluster Coordinators and Co-Coordinators that have facilitated the process within their own country's HC, as well as to the colleagues from the WHO Emergencies Program in the regions that have been supportive of the activities involved in completing the CCPM.

1 OVERVIEW

During 2022 Cluster Coordination Performance Monitoring (CCPM) was undertaken in 21 of the 31 active Health Clusters and Sectors. In the African Region (AFRO) Burkina Faso, Central African Republic, Democratic Republic of Congo, Ethiopia, Mozambique, Nigeria, Somalia, and South Sudan; in the Americas Region (AMRO) Colombia and Venezuela, in Eastern Mediterranean Region (EMRO) Afghanistan, Iraq, Sudan, Syria and Yemen; in the European Region (EURO) Ukraine; in South-East Asia (SEARO) Bangladesh and Myanmar; and in West Pacific Region (WPRO) Papua New Guinea.[1] A detailed map is available in page seven, below.

The 67% completion rate for 2022 is a significant increase compared to 23% in 2021 which was the least representative in previous years. In 2020 the completion rate was 59% and in 2019 60%.

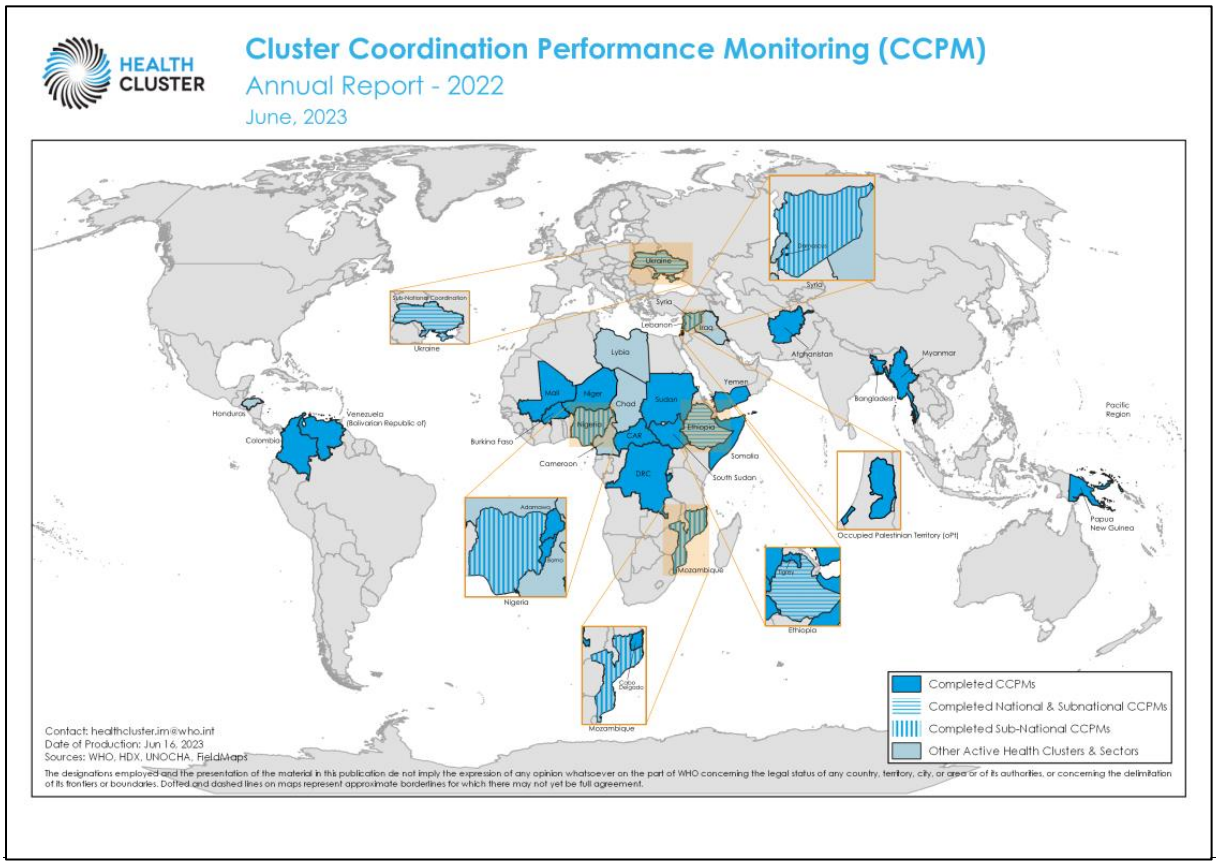
The CCPM covered the 6 core cluster functions and AAP which includes consultation with and involvement of the affected population in decision making, and the reception, investigation and actions regarding complaints about the assistance received. On average, it showed strong performance in Supporting Service Delivery and Monitoring and Reporting on Implementation of Cluster Strategy and Results.



CCPM performance against 6 HC Core functions + AAP

1 Papua New Guinea is not an IASC-activated cluster but a national health coordination mechanism which has adopted cluster guidance.

Countries with CCPM for 2022



2 INTRODUCTION

This document presents a brief description of the CCPM and the overview of results obtained from the surveys conducted in the countries. It also, includes a section on findings and recommendations.

2.1 Health Cluster Coordination Performance Monitoring - CCPM

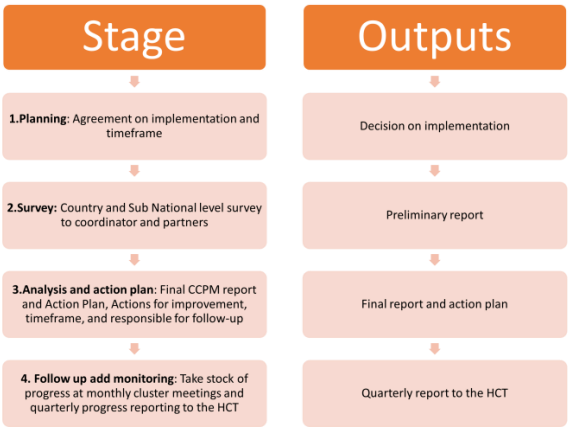
The Health Cluster Coordination Performance Monitoring (CCPM) is a component of the inter-cluster CCPM. It is an IASC mandated self-assessment of cluster performance against the 6 core cluster functions plus Accountability to Affected populations. It is a country led process, supported by Global Clusters and OCHA.

CCPM can be applied by both clusters and sectors and assists in taking stock of which coordination functions work well, and which areas need improvement. Beyond providing an opportunity for self-reflection, CCPM can also help to raise awareness of support requirements and provide a direct opportunity for accountability to all partners.

When is the CCPM implemented?
CCPM exercises should take place according to the following situations:

- In case of a new emergency onset, CCPM must occur in three to six months
- In case of protracted crises, at least once every year
- In case of confirmed weakening of core functions: the CCPM must happen with higher frequently

The four stages of CCPM



Stages of CCPM: The result of this exercise will help to identify areas to improve coordination performance

3 METHODOLOGY

During 2022 the Global Health Cluster (GHC) team reiterated the importance of undertaking such an exercise in all the clusters, and also redefined the overall support process, promoting a more predictable and systematic approach.

Additional to the web tool based in Kobo for the surveys, the team developed an overview dashboard connected to the system, which helped to identify the status of each CCPM in each cluster. Other factors added in 2022 included the availability of the survey and the availability of training materials in different languages together with a more detailed process and disaggregation of roles and responsibilities helped to increase the number of clusters.

Interactive dashboard

Connected to the survey system, the dashboard is an online tool that helps to identify in each region, which clusters conducted the CCPM, and the numbers of responses by survey. This includes the national CCPMs and also the subnational ones.

The dashboard is updated on a weekly basis and is available online in https://ccpm.healthcluster.org/dashboard.php

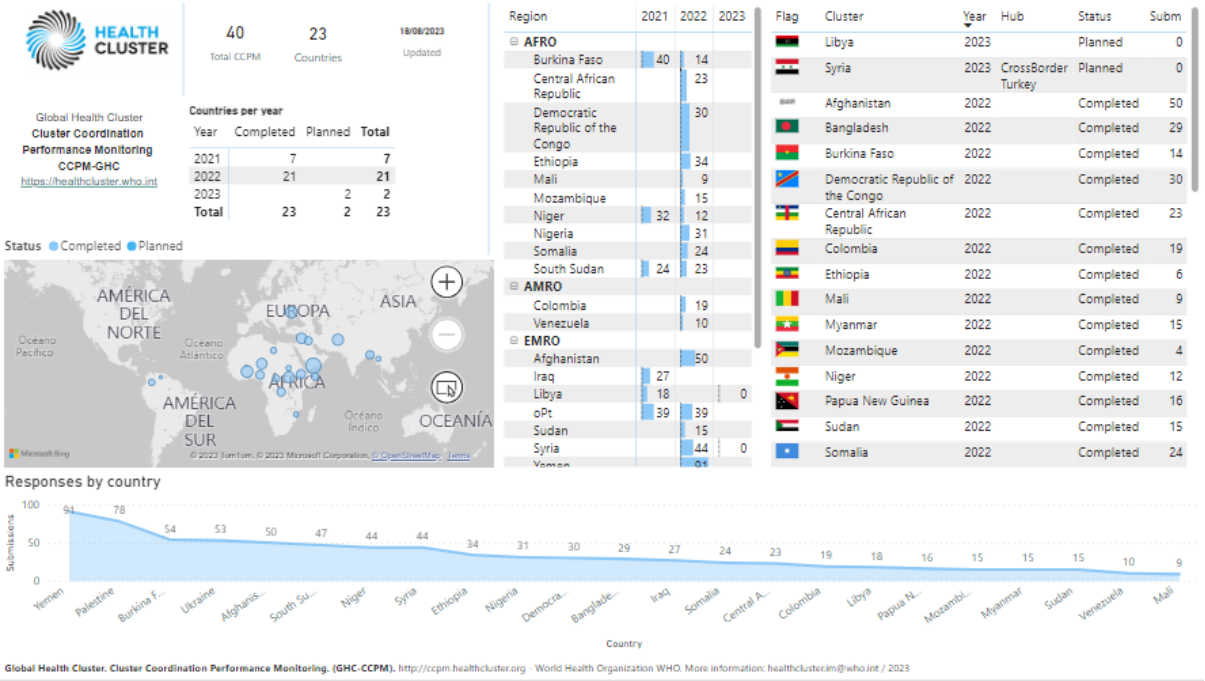


Image: Screenshot of CCPM Overview Dashboard by 2023 Q1 available at https://ccpm.healthcluster.org/dashboard.php

3.1 CCPM 10 steps, process, and timeline

	Preparation			Roll-out				Finalization		
		1 week		1 to 3 weeks			1 week	1 week		
STEP	1	2	3	4	5	6	7	8	9	10
Cluster coordination (national & subnational)	Get familiar with the process and tools	Present the approach during the Cluster Meeting	National level Coordinator to submit one Activation Request Form for both (national and subnational) levels	Transfer of email for partners with Instruction and CPQ	Fill in the Cluster Coordinators' CPQ (20-30 minutes)	Send reminders as required to ensure maximum participation	Retrieve the preliminary report from the portal and share with partners		Write-up the final report	Disseminate the final report
Cluster partners and coordinators		Agree on the approach and timeline during the Cluster meeting			Partners to fill in Partners' CPQ (20-30 minutes)			Hold a meeting to discuss and build consensus on the results, constraints, and way forward that will constitute the basis of the final report	Review the report	
Support functions	Provision of all required background information and support material including standard presentations		1) Adaptation of online questionnaires to the local setting 2) Generation of specific emails to national and subnational coordinators with required instructions and information for both coordinators and partners			Provide feedback on participation rate half-way into the process	Generation of preliminary report in editable version			

The process was led and supported by the GHC unit and entailed the following steps

- Designing an analysis plan for the CCPMs completed in 2021 utilizing existing data stored in CCPM-GHC tool
- Gathering feedback on process from Health Cluster Coordinators
- Validating the data internally
- Analyzing the data at National, Regional and Global level.
- Preparing the final report

The data covered all CCPMs completed at country level from the end of January 2021 to mid-January 2023.

The overall process and responsibilities helped to improve and increase the predictability of the outcome, and facilitated the access to the relevant information

Detailed Step-by-step process:

1- Prepare / reach out to HCs / agree on conducting the exercise
2- Adjust the CCPM ppt template to HC
3- Set up CCPM in the Kobo tool
4- CCPM planning call (share material)
5- Organize HC Partners' meeting
6- Socialize CCPM with partners
7- Produce periodic response rate updates (as many as possible)
8- Decide when to close the exercise
9- Produce a preliminary report
10- Share the CCPM Workshop guide
11- Prepare CCPM workshop with partners
12- Produce and share CCPM final report
13- Include the findings in the HC work plan

Roles and Responsibilities (RACI Matrix)

The RACI matrix helps to identify those responsible for each step of the process avoiding confusion and improving the overall process.

Step	Responsible	Accountable	Consulted	Informed
Preps / reach out to HCs / agree on conducting exercise	Technical Officer			
Adjust CCPM ppt template to HC	GHC-IM	Technical Officer		
Set up CCPM in Kobo tool	GHC-IM	Technical Officer		
CCPM Planning call (share material)	Technical Officer		GHC-IM	
Organize HC Partner's meeting	HC National Team		Technical Officer	
Socialize CCPM with partners	HC National Team	Technical Officer	GHC-IM	
Produce periodic response rate updates (as many as possible)	GHC-IM	Technical Officer		HC National Team
Decide to close the exercise	HC National Team		Technical Officer	
Produce preliminary report	GHC-IM	Technical Officer		HC National Team
Share CCPM Workshop guide	Technical Officer		GHC-IM	
Prepare CCPM workshop with partners	HC National Team	Technical Officer		
Produce and share CCPM final report	HC National Team	Technical Officer	GHC-IM	GHC-IM

3.2 Technical Methodology

The system allows completion of two different online surveys one targeting cluster coordinators and the other, cluster partners. The surveys were primarily comprised of Likert-type questions[2]. These questions use scaled responses, usually from very positive to very negative. For example, if partners were asked how frequently they attended cluster meetings, their response options would be: Always, Often, Sometimes, Rarely, Never. These options were then coded from 1 (Never) to 5 (Always). To calculate an overall score, an average was used. The global methodology differs from the country level reports which only look at absolute figures (in this instance, anyone who reported attending cluster meetings was counted in the positive, and only 'Never' counted as negative). Doing this provides an overall figure, but it does not show the variety in the same way a calculated figure can. To keep the results in a similar format, the calculated Likert scores were re-coded into a percentage (e.g. if the average response to "How frequently do you attend cluster meetings?" was 4.3, and the total possible score was 5, the percent score would be 86%.)

[2] The scale is named after its inventor, psychologist Rensis Likert who proposed a psychometric scale commonly involved in research that employs questionnaires. It is the most widely used approach to scaling responses in survey research, Likert, Rensis (1932). "A Technique for the Measurement of Attitudes". Archives of Psychology. 140: 1–55. https://psycnet.apa.org/record/1933-01885-001

3.2.1 Limitations

There are some limitations with this approach as the survey questions do not all use the same scales. In some cases, there may have been more negative options than in others.
To address this issue, the meanings of the various levels were carefully considered during analysis.

The system launched in 2021 helped to standardize the different methodologies used in the previous years and helped to address the limitations identified previously, related to the use of different methodologies in the countries. This will help in the comparison over time.

It is important to note that the CCPM survey is perception-based and does not necessarily provide a concrete means of comparison across health clusters. Even with clear instructions in the survey, it is quite likely that a high score in one location is not equal to the same score in another as the individuals who respond to the survey do so from their own perspective in each context.

Finally, as a performance monitoring tool, it has been decided that anonymity is a paramount concern. For this reason, all responses are anonymous beyond their cluster location and the type of organization they represent. One potential problem with this data collection method is the possible duplication of results. For analysis, it is presumed that each response represents an organization, and that all organizations follow the instructions provided to only respond once. Unfortunately, there remains a delicate balance between the need to ensure there are no duplicate responses and that organizations have correctly classified their type, against the need to ensure partners feel comfortable reporting honestly on cluster performance without concern for repercussions if they provide negative reviews. At this stage, all sectors have decided to err on the side of frank reporting and ensuring anonymity of respondents. Additionally, it is agreed that for addressing this issue, the partners' survey includes the organization identifier field (that can be the name, acronym or alias of the organization) and that information is kept private and accessible only to the GHC team and not the cluster coordinators.

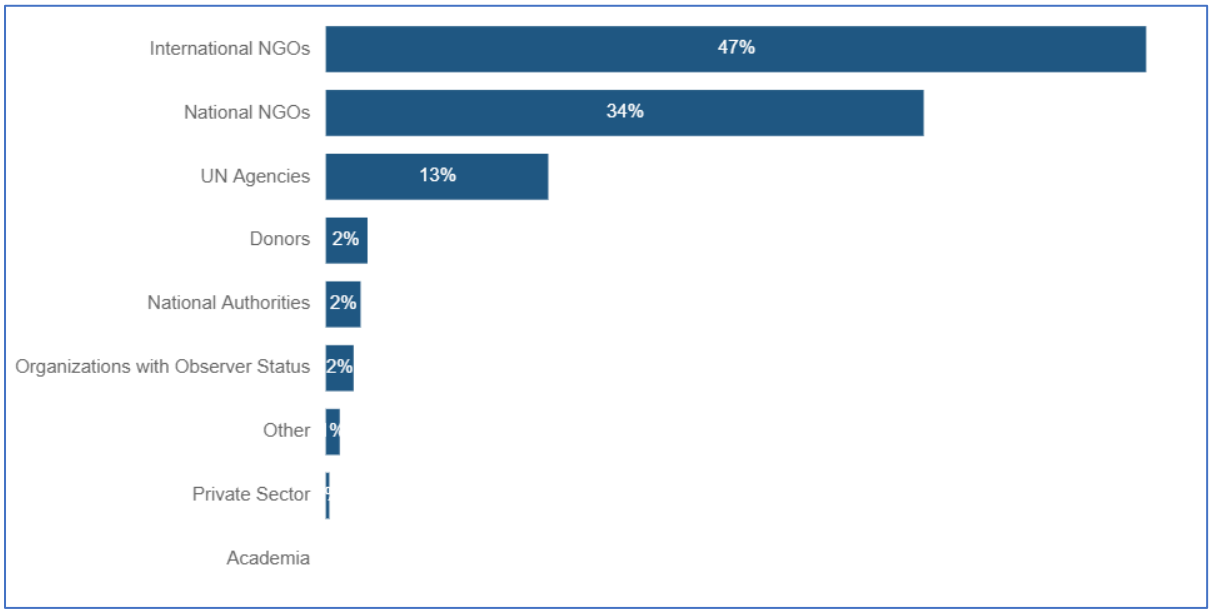
4 SURVEY RESULTS

Completion and Response Rate

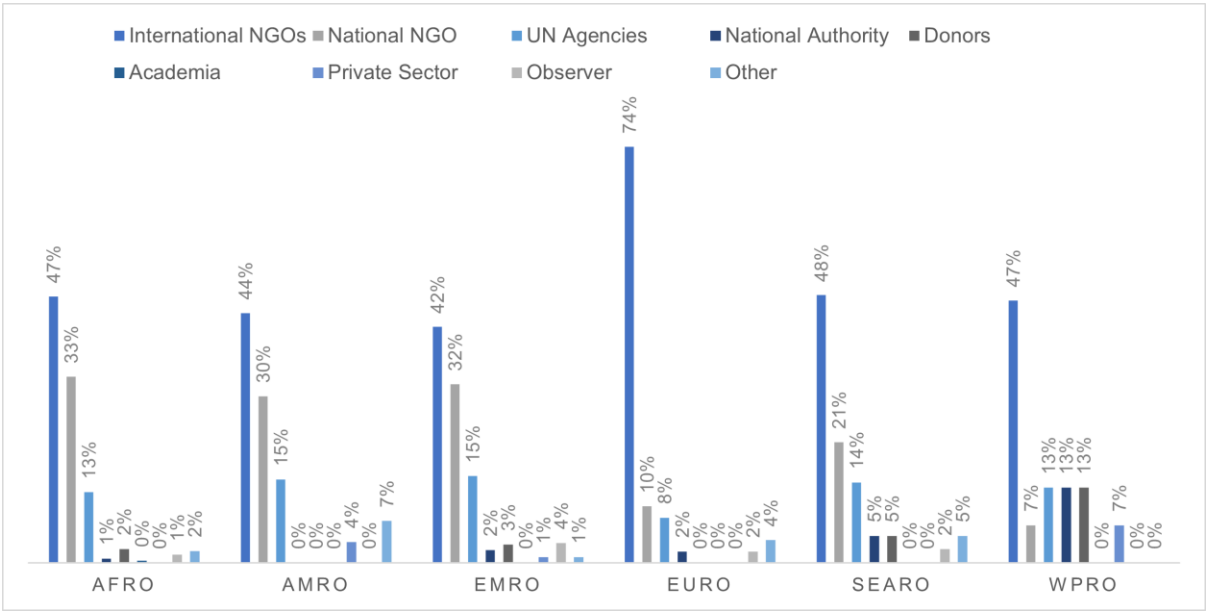
Overall Completion Rate

	National Level	Coordinator Responses	Partner Responses
AFRO	12	11	175
AMRO	2	2	27
EMRO	7	8	231
EURO	2	2	36
SEARO	2	2	42
WPRO	1	1	15

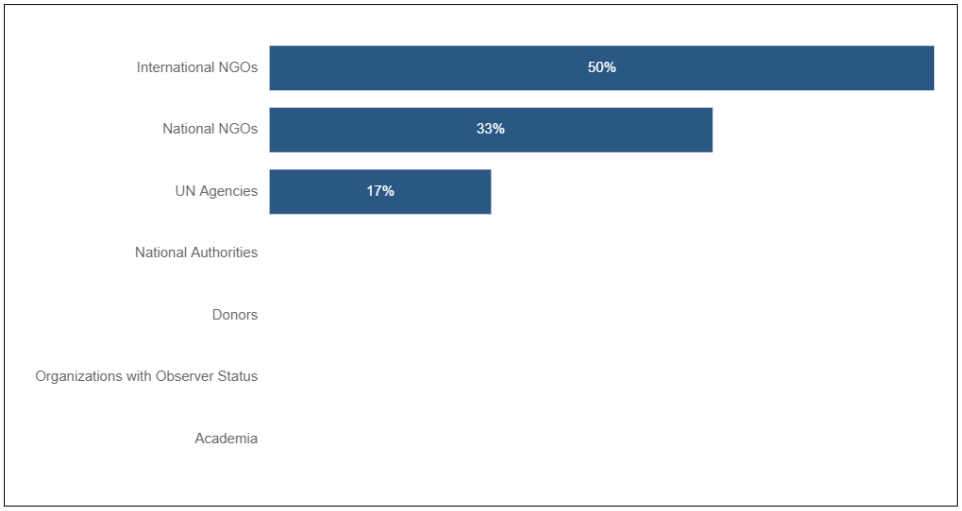
Response Rate of Partners by Type of Organization and Region



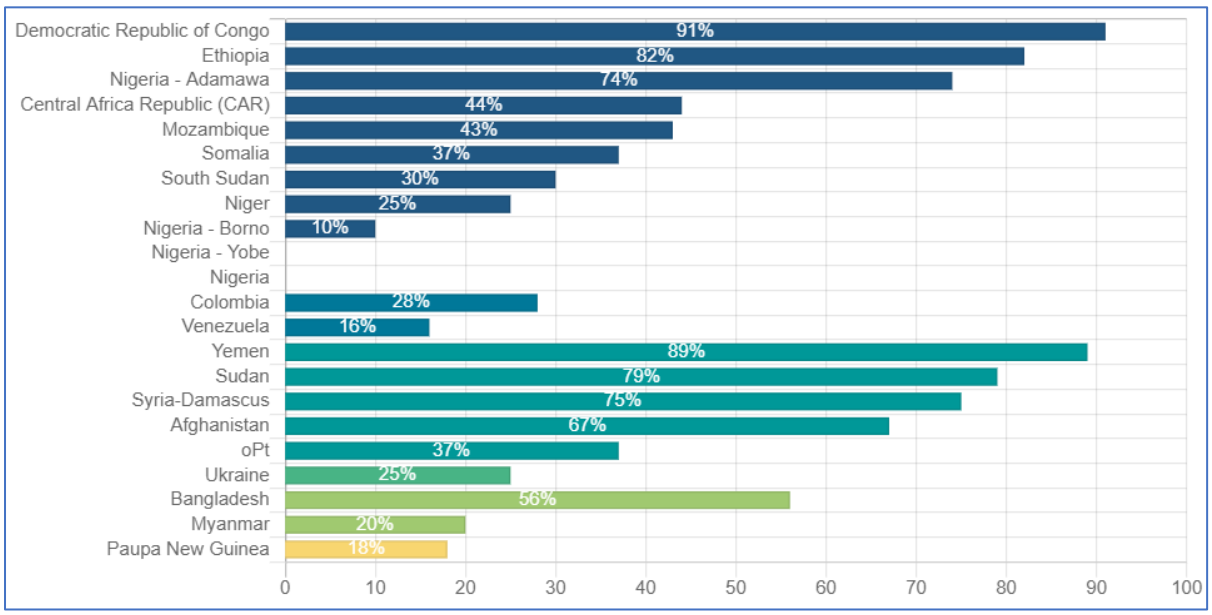
Partners by Region



Response Rate of Partners by Type of Organization and Region



Response Rate by Country



Summary Results - Overall Performance

Support to Service Delivery

	Partner satisfaction with meeting frequency	Organizations' ability to participate fully in cluster meetings (access language)	Cluster meeting ability to identify and discuss needs, gaps and response priorities	Cluster ability to take strategic decisions about the direction of the response	Frequency of partner contribution to 3W mapping	Partner contribution to analysis of gaps and overlaps in 3W data	Use of cluster analysis of gaps and overlaps in partner decision making
AFRO	88%	90%	82%	83%	81%	76%	80%
AMRO	83%	84%	73%	69%	81%	58%	64%
EMRO	86%	89%	83%	80%	83%	75%	80%
EURO	85%	85%	73%	73%	77%	62%	65%
SEARO	84%	87%	77%	79%	82%	74%	78%
WPRO	80%	85%	71%	74%	74%	55%	57%

		Partner satisfaction with meeting frequency	Organizations ability to participate fully in cluster meetings (access language)	Cluster meeting ability to identify and discuss needs, gaps and response priorities	Cluster ability to take strategic decisions about the direction of the response	Frequency of partner contribution to 3W mapping	Partner contribution to analysis of gaps and overlaps in 3W data	Use of cluster analysis of gaps and overlaps in partner decision making
AFRO	Central African Republic (CAR)	92%	91%	81%	80%	83%	73%	79%
	Democratic Republic of Congo (DRC)	83%	85%	77%	71%	73%	61%	65%
	Ethiopia	92%	93%	80%	80%	77%	78%	80%
	Mozambique	84%	89%	78%	84%	84%	75%	78%
	Niger	78%	92%	74%	82%	85%	67%	71%
	Nigeria	80%	80%	80%	93%	70%	80%	90%
	Nigeria - Adamawa	91%	92%	85%	82%	84%	76%	79%

	Nigeria - Borno	95%	93%	88%	88%	86%	83%	88%
	Nigeria - Yobe	87%	96%	100%	84%	80%	87%	87%
	Somalia	88%	92%	82%	85%	85%	80%	84%
	South Sudan	97%	92%	83%	79%	88%	79%	82%
AMRO	Colombia	80%	87%	73%	68%	83%	64%	72%
	Venezuela	87%	81%	73%	70%	78%	51%	57%
EMRO	Afghanistan	93%	93%	86%	86%	88%	82%	85%
	oPt	80%	88%	84%	78%	77%	74%	77%
	Sudan	83%	83%	77%	77%	87%	69%	80%
	Syria-Damascus	95%	93%	90%	90%	88%	82%	85%
	Yemen	86%	89%	81%	76%	83%	73%	76%
EURO	Ukraine	85%	85%	73%	73%	77%	62%	65%
SEARO	Bangladesh	85%	88%	81%	83%	85%	78%	81%
	Myanmar	83%	86%	72%	74%	79%	71%	74%
WPRO	Papua New Guinea	80%	85%	71%	74%	74%	55%	57%
	Global	**86.55%**	**88.77%**	**80.41%**	**79.86%**	**81.55%**	**72.73%**	**76.91%**

From the data, we can infer the following about "Support service delivery" in different regions and countries.

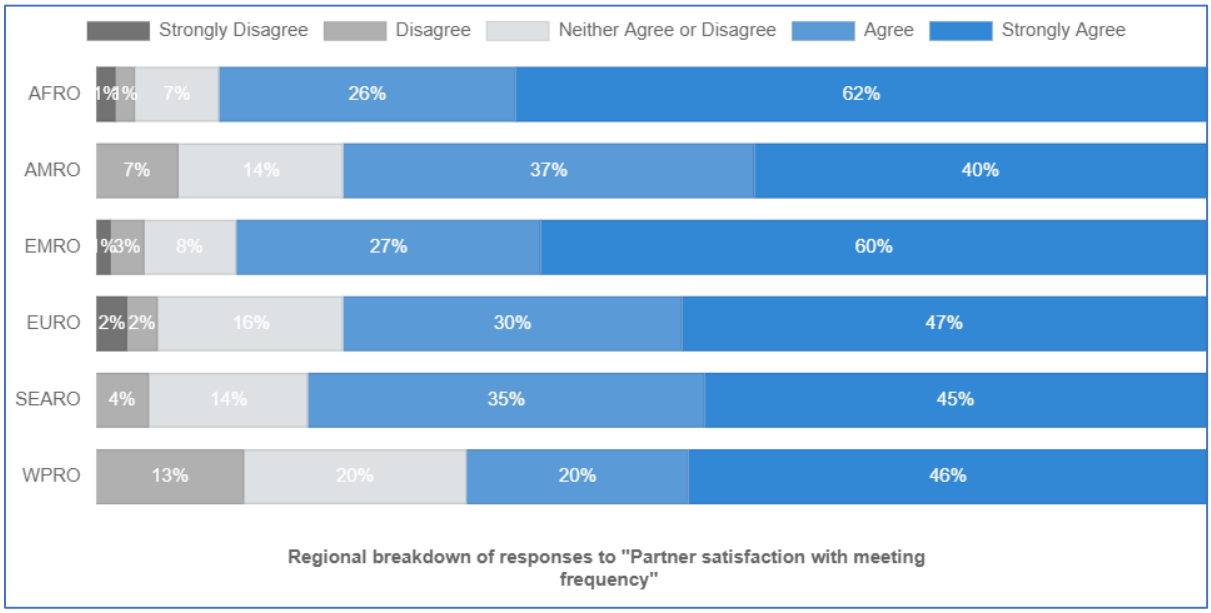
At the region level:

- Partner satisfaction with meeting frequency is relatively high in all regions, with EMRO having the highest score of 89% and WPRO having the lowest score of 80%.
- Organizations' ability to participate fully in cluster meetings is high in all regions, with a range of 83% to 89%.
- Cluster meeting ability to identify and discuss needs, gaps, and response priorities is high in all regions, with a range of 71% to 83%.
- Cluster ability to take strategic decisions about the direction of the response is relatively high in all regions, with a range of 69% to 81%.
- The frequency of partner contribution to 3W mapping is high in all regions, with a range of 74% to 86%.
- Partner contribution to the analysis of gaps and overlaps in 3W data is also high in all regions, with a range of 55% to 76%.
- The use of cluster analysis of gaps and overlaps in partner decision-making is the lowest scoring metric in all regions, with a range of 57% to 80%.
- Overall, the data indicates that "Support service delivery" is being satisfactorily coordinated across different regions, with relatively high scores for most metrics. However, there is still some room for improvement, particularly in the use of cluster analysis of gaps and overlaps in partner decision-making.

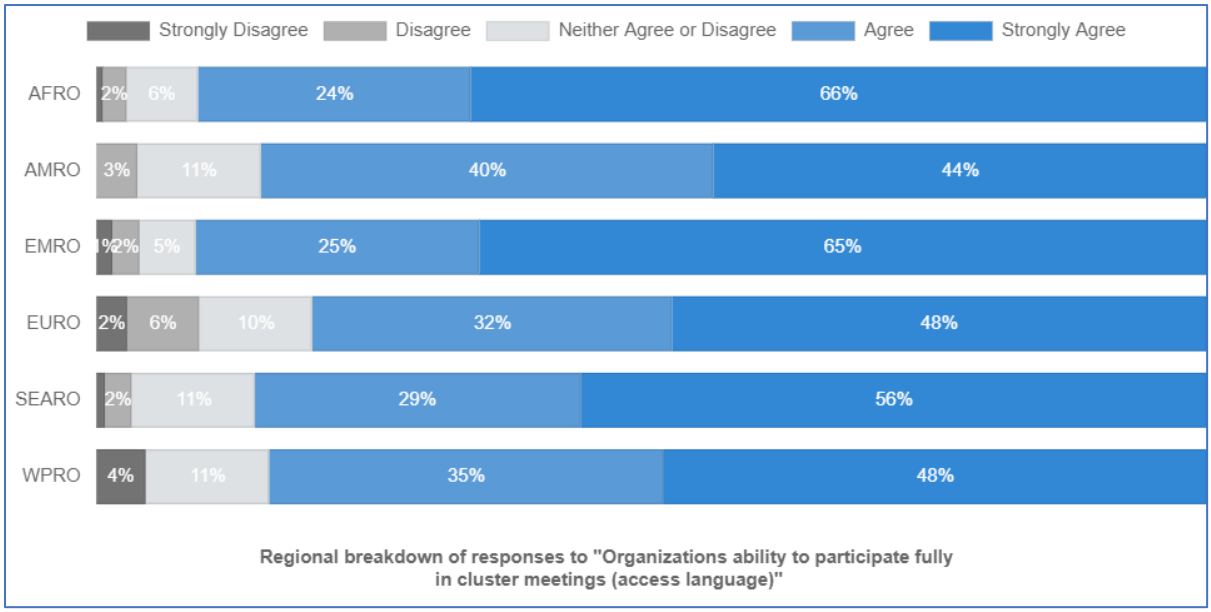
- The partners' satisfaction with the frequency of meetings is generally high across all regions, with an average of 85%. However, there are some countries where the satisfaction rate is lower, such as South Sudan with only 49%.

At the country level:

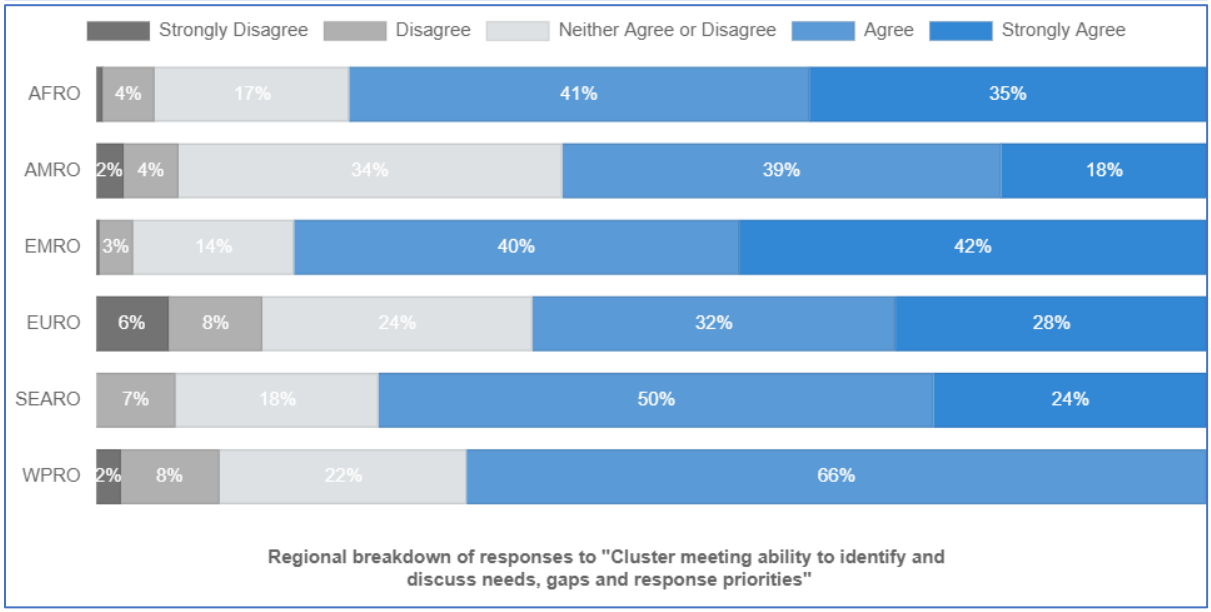
- The ability of organizations to participate fully in cluster meetings is high in most countries, with an average of 86.3%. However, there are some countries where this ability is lower, such as South Sudan with only 46%.
- The cluster meeting ability to identify and discuss needs, gaps, and response priorities is generally good, with an average of 78.7%. However, there are some countries where this ability is lower, such as Myanmar with only 72%.
- The cluster's ability to take strategic decisions about the direction of the response is high, with an average of 78%. However, there are some countries where this ability is lower, such as Colombia with only 68%.
- The frequency of partner contribution to 3W mapping is generally high, with an average of 79.7%. However, there are some countries where this frequency is lower, such as Venezuela with only 70%.
- The partner contribution to the analysis of gaps and overlaps in 3W data is generally good, with an average of 71.7%. However, there are some countries where this contribution is lower, such as Papua New Guinea with only 55%.
- The use of cluster analysis of gaps and overlaps in partner decision making is generally good, with an average of 75.45%. However, there are some countries where this use is lower, such as Myanmar with only 71%.



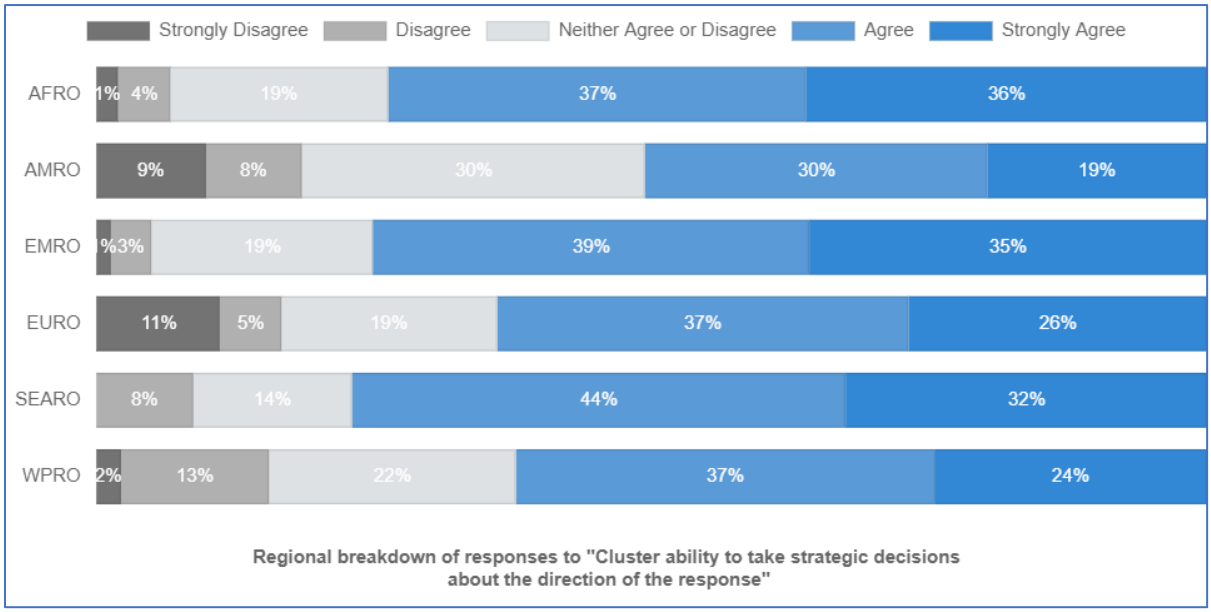
Regional breakdown of responses to "Partner satisfaction with meeting frequency"



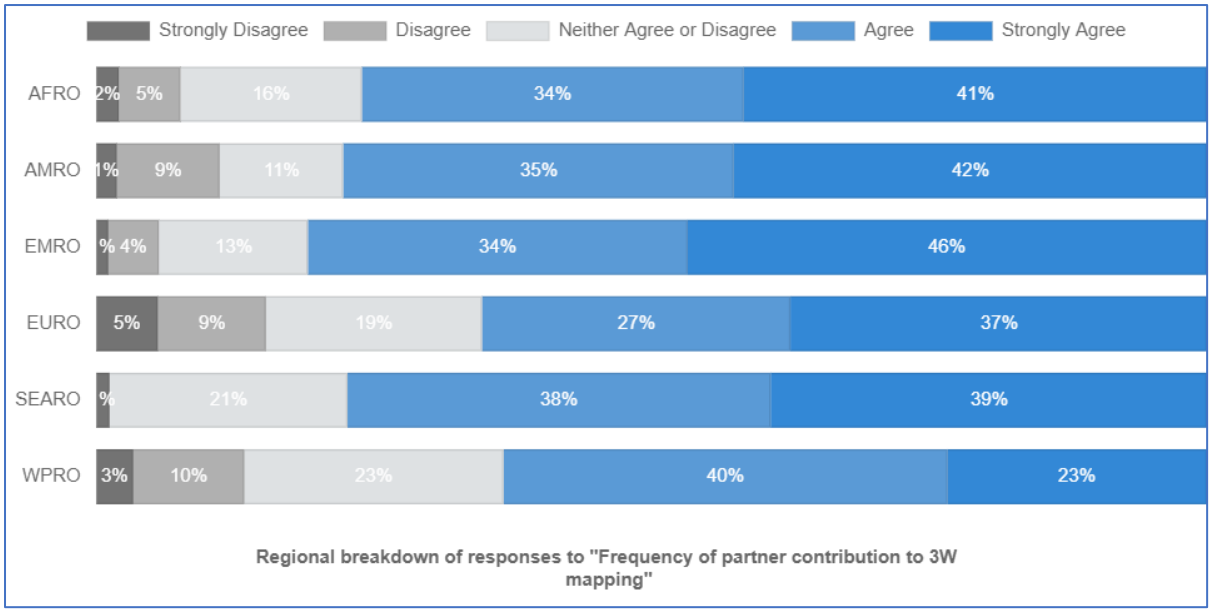
Regional breakdown of responses to "Organizations ability to participate fully in cluster meetings (access language)"



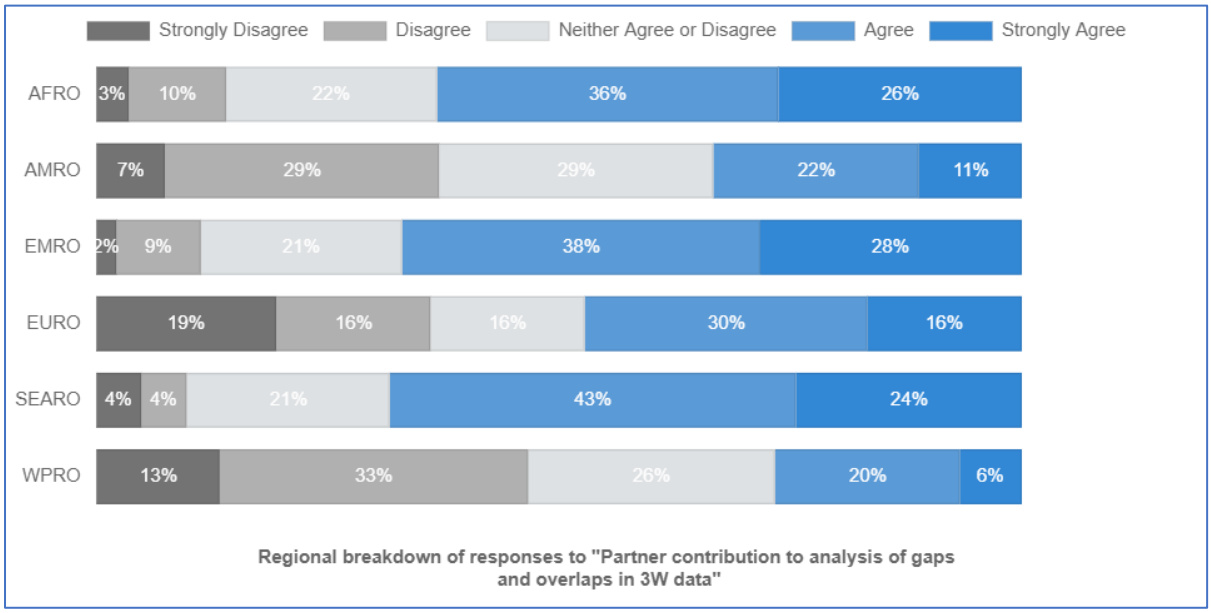
Regional breakdown of responses to "Cluster meeting ability to identify and discuss needs, gaps and response priorities"



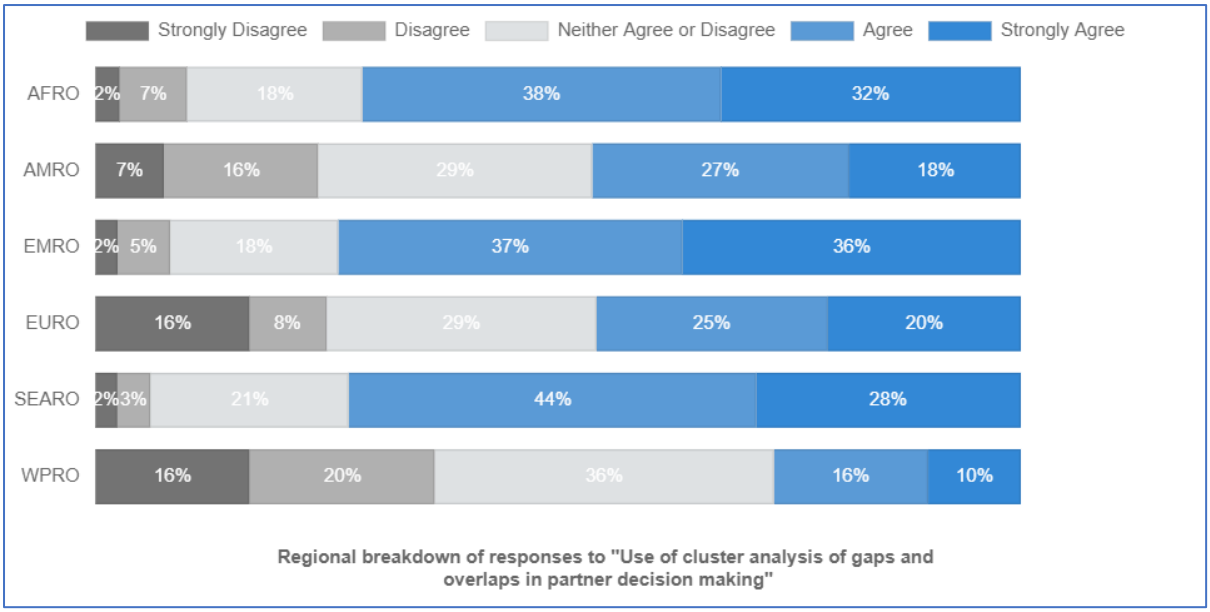
Regional breakdown of responses to "Cluster ability to take strategic decisions about the direction of the response"



Regional breakdown of responses to "Frequency of partner contribution to 3W mapping"



Regional breakdown of responses to "Partner contribution to analysis of gaps and overlaps in 3W data"



Regional breakdown of responses to "Use of cluster analysis of gaps and overlaps in partner decision making"

Informing Strategic Decision-Making of the HC / HCT

	Organizations that used sectoral needs assessment tools and guidance agreed by cluster partners	Organizations involved in coordinated sectoral needs assessment and surveys	Organizations participation in joint situation analyses	Organizations that shared reports of their surveys and assessments with the cluster
AFRO	78%	75%	13%	74%
AMRO	61%	63%	8%	62%
EMRO	74%	72%	10%	71%
EURO	70%	69%	8%	66%
SEARO	77%	72%	10%	69%
WPRO	67%	65%	10%	63%

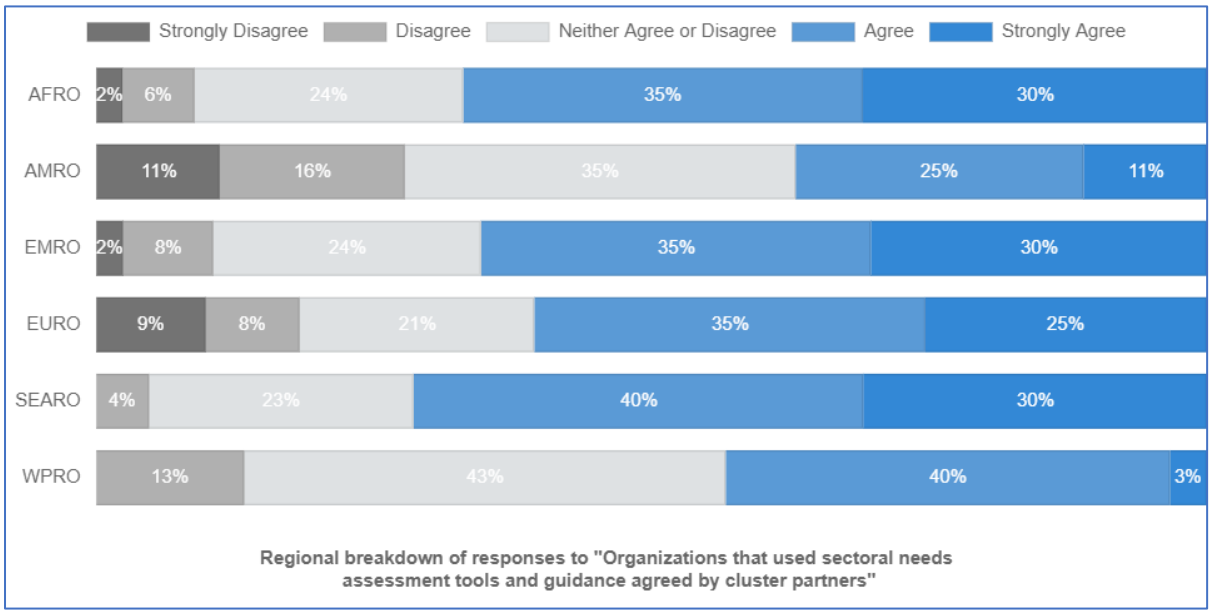
		Organizations that used sectoral needs assessment tools and guidance agreed by cluster partners	Organizations involved in coordinated sectoral needs assessment and surveys	Organizations participation in joint situation analyses	Organizations that shared reports of their surveys and assessments with the cluster
AFRO	Central African Republic (CAR)	78%	70%	13%	70%

	Democratic Republic of Congo (DRC)	69%	65%	10%	57%
	Ethiopia	77%	75%	11%	79%
	Mozambique	76%	74%	12%	75%
	Niger	74%	66%	9%	62%
	Nigeria	80%	80%	20%	80%
	Nigeria - Adamawa	82%	80%	9%	74%
	Nigeria - Borno	81%	83%	18%	88%
	Nigeria - Yobe	80%	76%	20%	73%
	Somalia	80%	79%	15%	75%
	South Sudan	83%	83%	10%	84%
AMRO	Colombia	63%	62%	6%	64%
	Venezuela	59%	64%	11%	60%
EMRO	Afghanistan	81%	73%	7%	68%
	oPt	71%	70%	12%	72%
	Sudan	66%	64%	8%	59%
	Syria-Damascus	87%	86%	13%	80%
	Yemen	73%	71%	8%	72%
EURO	Ukraine	70%	69%	8%	66%
SEARO	Bangladesh	84%	79%	10%	78%
	Myanmar	71%	65%	10%	60%
WPRO	Papua New Guinea	67%	65%	10%	63%
	Global	**75.09%**	**72.68%**	**11.36%**	**70.86%**

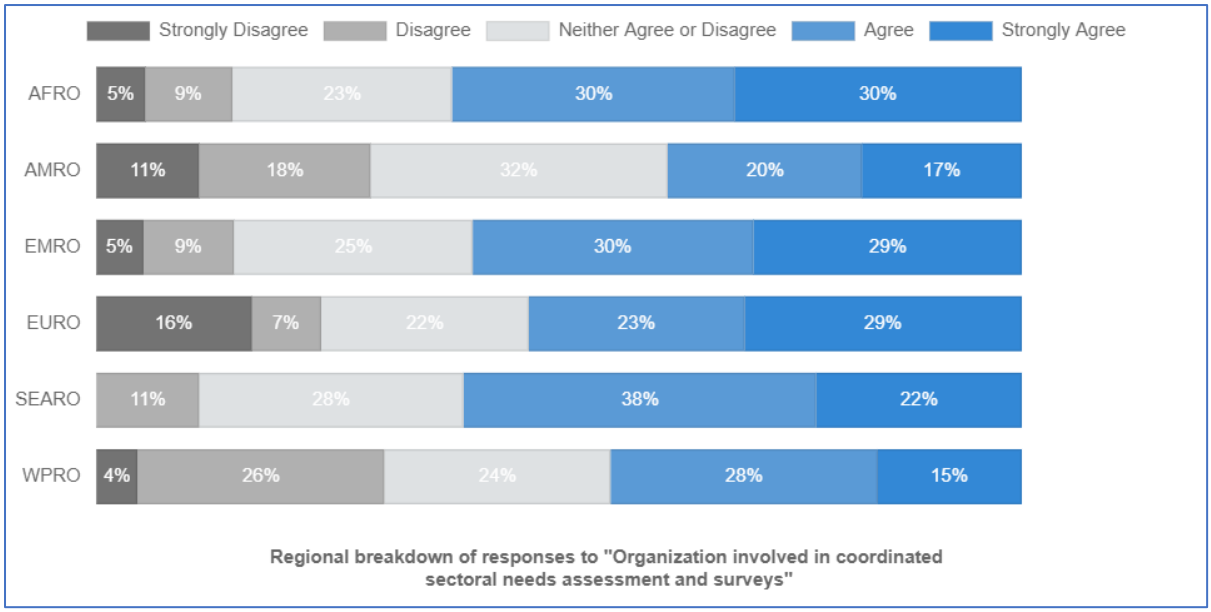
Related to the "Informing Strategic Decision-Making of the HC / Humanitarian Country Team" metric, we can infer the following from the data:

- Across all regions, the percentage of organizations that use sectoral needs assessment tools and guidance agreed by cluster partners is relatively high, with a range of 61% to 77%.
- Similarly, the percentage of organizations involved in coordinated sectoral needs assessment and surveys is high in all regions, with a range of 63% to 73%.
- However, the percentage of organizations that participated in joint situation analyses is very low across all regions, with a range of 8% to 13%.
- In general, most organizations in the surveyed countries that used sectoral needs assessment tools and guidance agreed by cluster partners also participated in coordinated sectoral needs assessment and surveys.

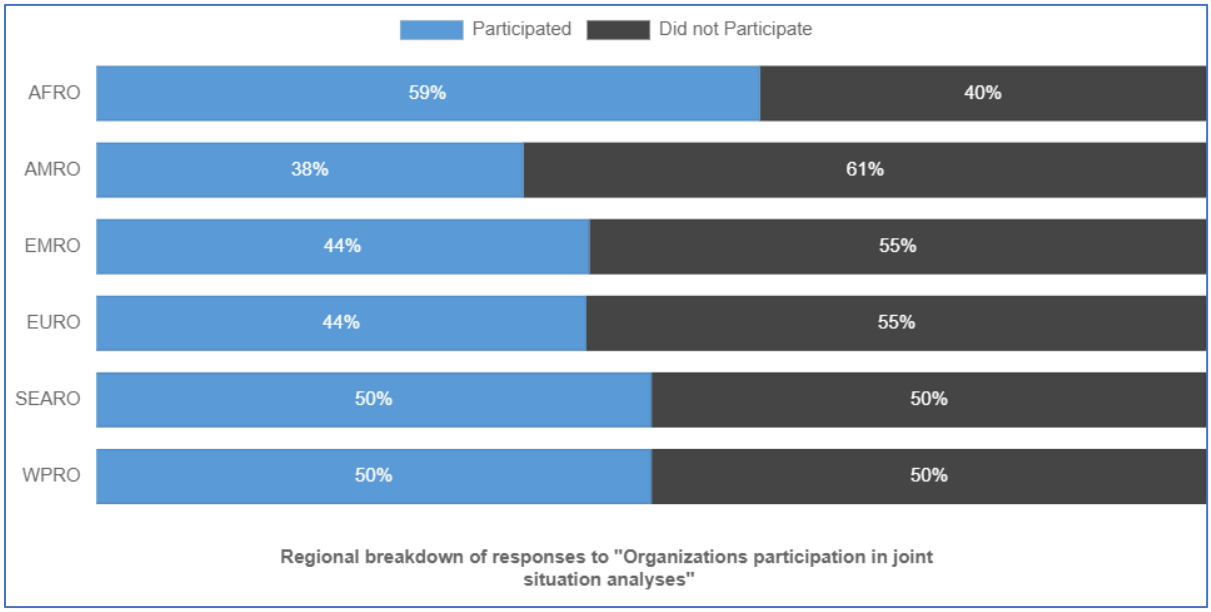
- The level of participation in joint situation analyses is generally low across all regions, with only a few countries reporting more than 15% participation.
- Organizations in Nigeria and Afghanistan had high levels of participation in all four areas, with most reporting over 75% participation.
- South Sudan had the lowest levels of participation in all areas, with less than half of organizations reporting participation in sectoral needs assessments and surveys, and joint situation analyses.
- The global averages for all four areas are relatively high, with over 70% of organizations reporting participation in each area.
- Finally, the percentage of organizations that shared reports of their surveys and assessments with the cluster is relatively high in all regions, with a range of 63% to 70%.
- Overall, the data indicates that there is a relatively high level of coordination and sharing of sectoral needs assessment tools and guidance among organizations across different regions. However, the low percentage of organizations that participated in joint situation analyses suggests that there is significant room for improvement in this area. The relatively high percentage of organizations sharing reports of their surveys and assessments with the cluster is positive and indicates a willingness to collaborate and inform strategic decision-making.



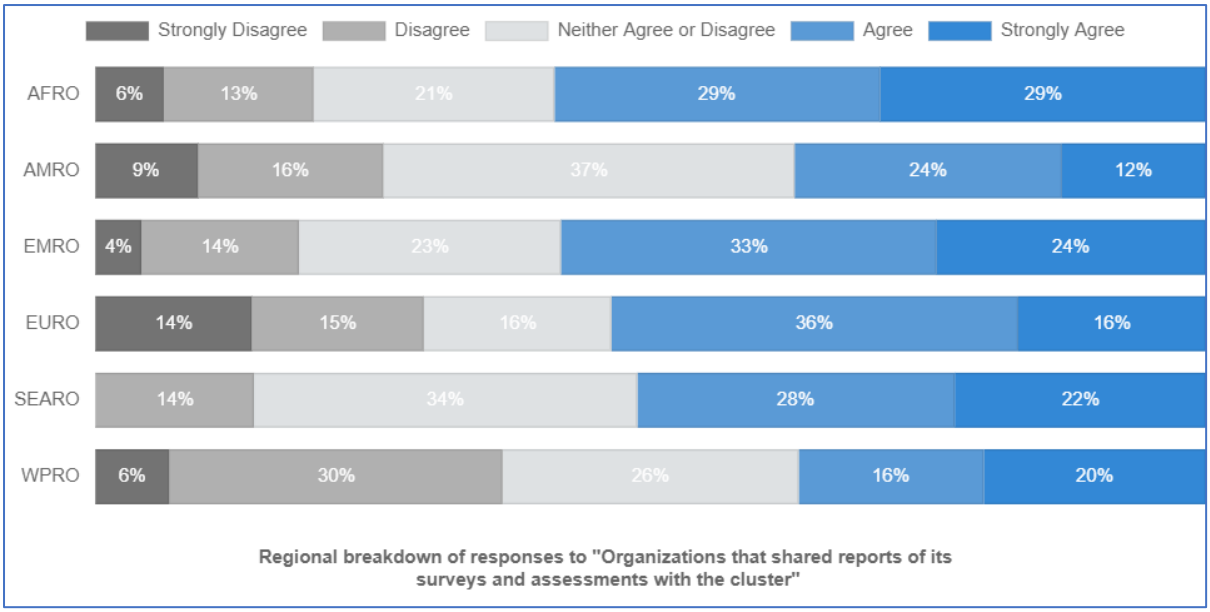
Regional breakdown of responses to "Organizations that used sectoral needs assessment tools and guidance agreed by cluster partners"



Regional breakdown of responses to "Organization involved in coordinated sectoral needs assessment and surveys"



Regional breakdown of responses to "Organizations participation in joint situation analyses"



Regional breakdown of responses to "Organizations that shared reports of its surveys and assessments with the cluster"

Planning and Strategy Development

	Organizations have helped to develop cluster strategic plans	Cluster partners agreed technical standards and guidance and have applied them	Cluster partners participated in prioritizing proposals under strategic plan with a transparent process	Proposals were prioritized against the strategic plan in a manner that was fair to all partners	The cluster coordinator reported on the cluster funding status against needs in appropriate time frames
AFRO	84%	15%	84%	79%	80%
AMRO	87%	10%	78%	80%	74%
EMRO	82%	20%	86%	84%	86%
EURO	86%	0%	66%	73%	90%
SEARO	82%	20%	81%	84%	82%
WPRO	86%	0%	87%	88%	80%

One significant finding in the comparison between the 2021 and 2022 datasets is that the percentage of organizations that helped to develop cluster strategic plans has decreased in all regions except for AMRO. Additionally, in the 2022 dataset, the percentage of cluster partners who agreed on technical standards and guidance and applied them has decreased in EURO and WPRO, and remained the same in AMRO, while increasing slightly in AFRO, EMRO, and SEARO.

Another significant finding is that the percentage of cluster partners who participated in prioritizing proposals under the strategic plan with a transparent process has decreased in EURO, but increased in AFRO, AMRO, EMRO, SEARO, and WPRO. However, the percentage of proposals that were prioritized against the strategic plan in a manner that was fair to all partners has decreased in AFRO, EMRO, and WPRO.

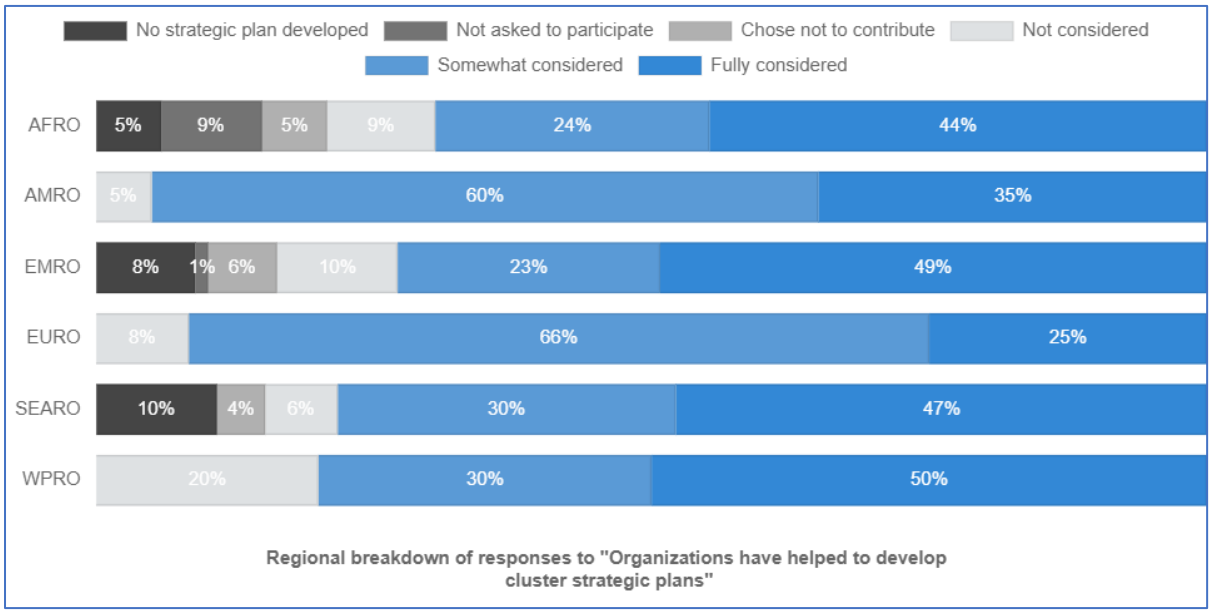
Finally, the percentage of cluster coordinators who reported on the cluster funding status against needs in appropriate time frames has decreased in AFRO, EMRO, and SEARO, but increased slightly in AMRO and EURO, and remained the same in WPRO.

		Organizations have helped to develop cluster strategic plans	Cluster partners agreed technical standards and guidance and have applied them	Cluster partners participated in prioritizing proposals under strategic plan with a transparent process	Proposals were prioritized against the strategic plan in a manner that was fair to all partners	The cluster coordinator reported on the cluster funding status against needs in appropriate time frames
AFRO	Central African Republic (CAR)	83%	20%	87%	84%	80%
	Democratic Republic of Congo	55%	20%	60%	55%	58%
	Ethiopia	80%	20%	93%	86%	83%
	Mozambique	97%	20%	75%	47%	43%
	Niger	76%	NaN%	82%	88%	92%
	Nigeria	100%	0%	100%	100%	100%
	Nigeria - Adamawa	70%	20%	70%	73%	80%
	Nigeria - Borno	88%	20%	94%	100%	100%
	Nigeria - Yobe	100%	0%	95%	90%	100%
	Somalia	72%	20%	86%	88%	90%
	South Sudan	85%	20%	90%	91%	91%
AMRO	Colombia	84%	20%	79%	80%	54%
	Venezuela	90%	NaN%	77%	80%	93%
EMRO	Afghanistan	84%	20%	91%	90%	90%
	oPt	81%	20%	86%	84%	89%
	Sudan	77%	20%	88%	86%	86%
	Syria-Damascus	96%	20%	93%	93%	93%
	Yemen	79%	20%	77%	76%	76%
EURO	Ukraine	86%	NaN%	66%	73%	90%
SEARO	Bangladesh	91%	20%	93%	93%	87%
	Myanmar	73%	20%	70%	76%	76%
WPRO	Papua New Guinea	86%	NaN%	87%	88%	80%

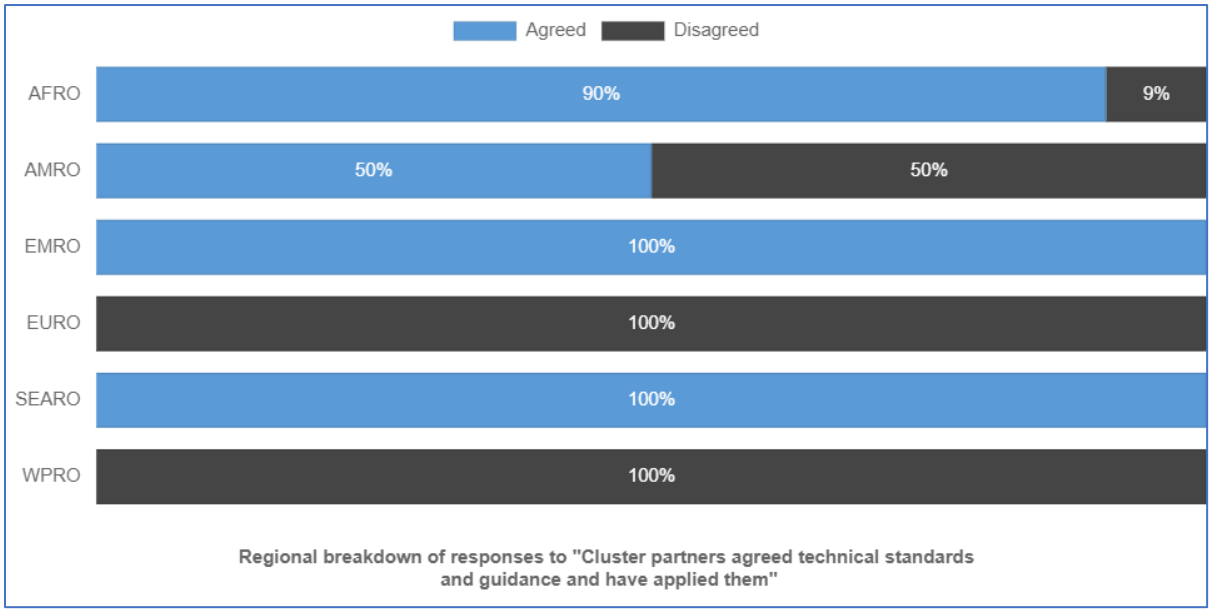
Global	**83.32%**	**14.55%**	**83.59%**	**82.77%**	**83.23%**

We can see that there are variations in the level of achievement of planning and strategy development across regions and countries.

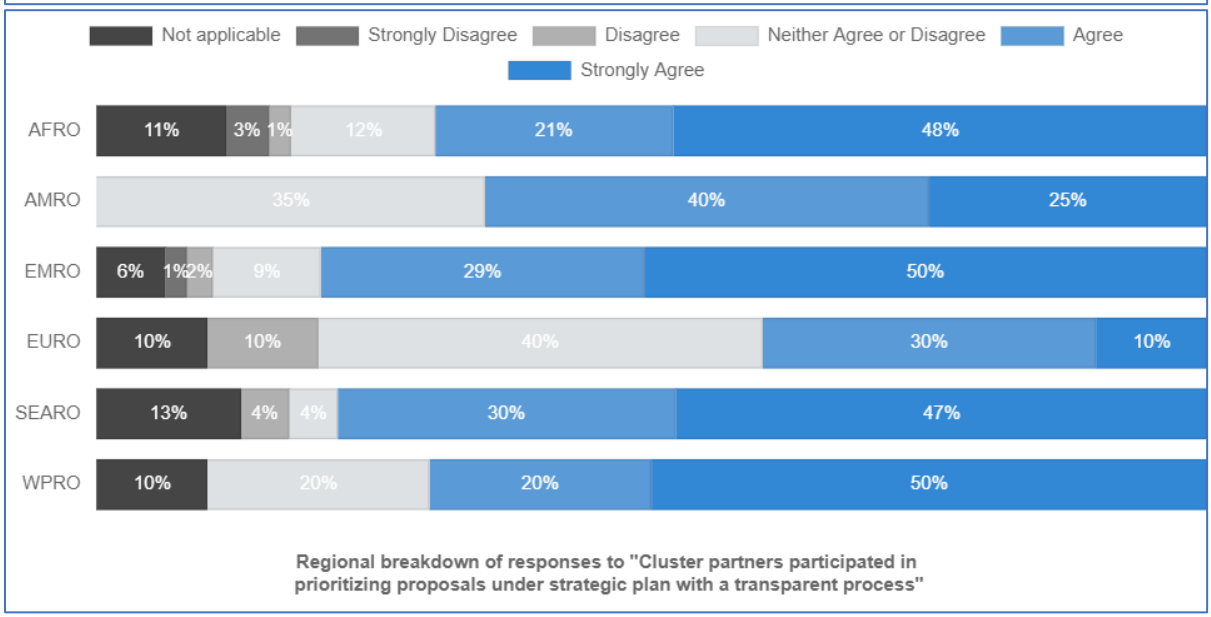
- *In the AFRO region, Nigeria has achieved 100% in all categories, while Central African Republic and Mozambique have achieved high percentages in most categories. On the other hand, South Sudan and the Democratic Republic of Congo have achieved lower percentages in all categories.*
- *In the AMRO region, Colombia and Venezuela have achieved high percentages in most categories.*
- *In the EMRO region, Syria-Damascus has achieved high percentages in all categories, while Sudan and Yemen have achieved lower percentages in some categories.*
- *In the EURO region, Ukraine has achieved high percentages in most categories, except for technical standards and guidance.*
- *In the SEARO region, Bangladesh has achieved high percentages in most categories, while Myanmar has achieved lower percentages in some categories.*
- *In the WPRO region, Papua New Guinea has achieved high percentages in most categories, except for technical standards and guidance.*
- *Globally, the average achievement percentage is highest for organizations helping to develop cluster strategic plans, followed by cluster partners participating in prioritizing proposals under strategic plan with a transparent process. The lowest achievement percentage is for cluster partners agreeing technical standards and guidance and applying them, which is cause for concern.*
- *In terms of "Planning and strategy development," the regions of AFRO, AMRO, EMRO, and WPRO have scored well with percentages ranging from 78% to 86% in most of the criteria. However, EURO has scored relatively lower in some of the criteria, such as technical standards and guidance and prioritizing proposals.*
- *At the country level, Nigeria, Afghanistan, and Syria-Damascus have scored well in most of the criteria under "Planning and strategy development." On the other hand, South Sudan and Mozambique have scored lower in most of the criteria.*



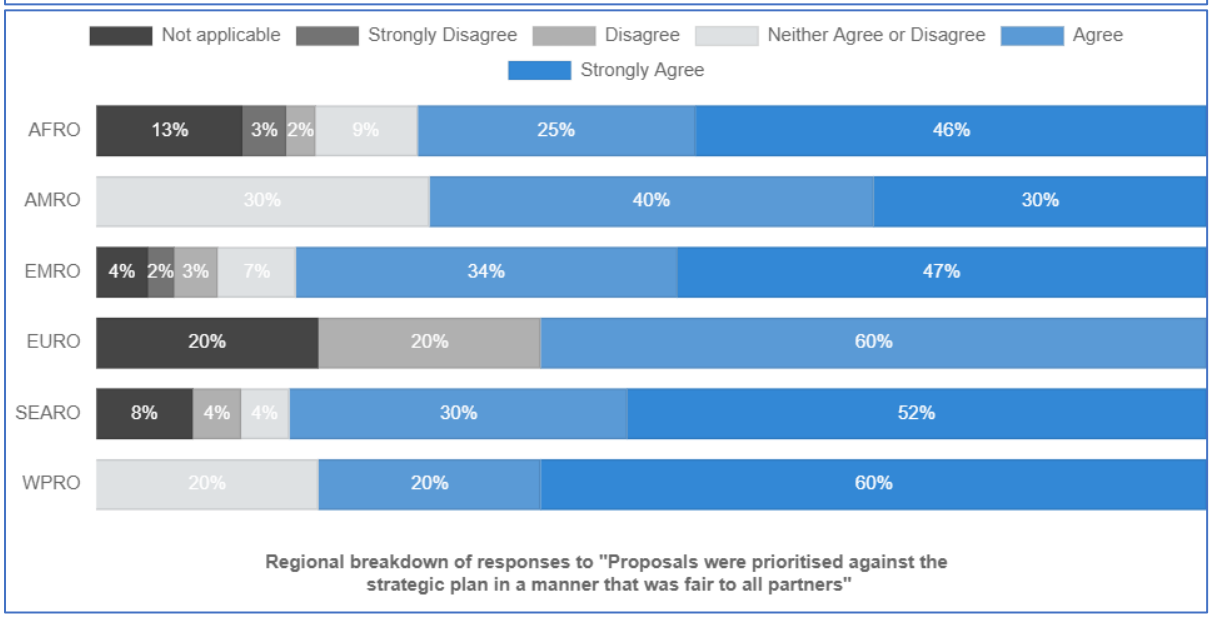
Regional breakdown of responses to "Organizations have helped to develop cluster strategic plans"



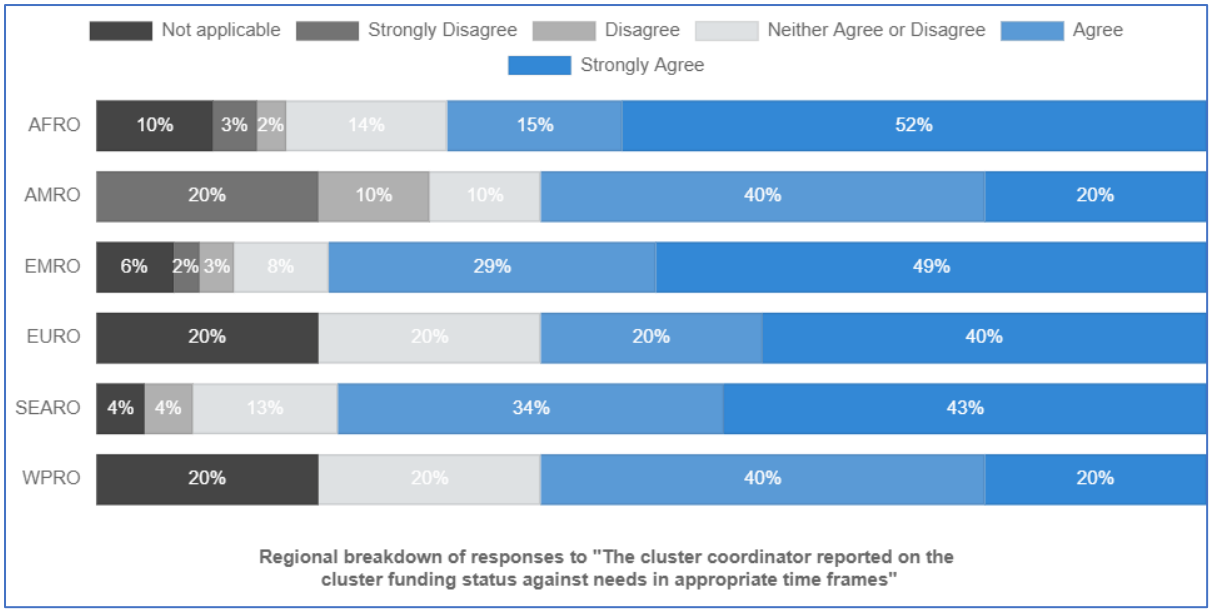
Regional breakdown of responses to "Cluster partners agreed technical standards and guidance and have applied them"



Regional breakdown of responses to "Cluster partners participated in prioritizing proposals under strategic plan with a transparent process"



Regional breakdown of responses to "Proposals were prioritised against the strategic plan in a manner that was fair to all partners"



Regional breakdown of responses to "The cluster coordinator reported on the cluster funding status against needs in appropriate time frames"

Advocacy

	Issues requiring advocacy have been identified and discussed together	Organizations have participated in cluster advocacy activities
AFRO	79%	70%
AMRO	67%	57%
EMRO	74%	67%
EURO	64%	48%
SEARO	73%	67%
WPRO	73%	63%

- *The regions of AFRO, SEARO, and WPRO have scored relatively higher with percentages ranging from 67% to 73% in both criteria. The other regions have scored lower in comparison.*
- *The percentage of organizations that have participated in cluster advocacy activities ranges from 48% to 67%, with the highest percentage in AFRO and EMRO regions. This suggests that while many organizations have identified issues requiring advocacy, not all of them have participated in advocacy activities.*

		Issues requiring advocacy have been identified and discussed together	Organizations have participated in cluster advocacy activities
AFRO	Central African Republic (CAR)	82%	72%
	Democratic Republic of Congo	72%	46%
	Ethiopia	82%	76%
	Mozambique	68%	63%
	Niger	76%	61%
	Nigeria	80%	80%
	Nigeria - Adamawa	86%	75%
	Nigeria - Borno	93%	82%
	Nigeria - Yobe	93%	80%
	Somalia	79%	69%
	South Sudan	75%	74%
AMRO	Colombia	61%	59%
	Venezuela	73%	54%
EMRO	Afghanistan	76%	68%
	oPt	71%	66%
	Sudan	71%	57%

	Syria-Damascus	84%	80%
	Yemen	71%	65%
EURO	Ukraine	64%	48%
SEARO	Bangladesh	79%	74%
	Myanmar	68%	61%
WPRO	Papua New Guinea	73%	63%
	Global	**76.23%**	**66.95%**

The HC with the highest scores in "Issues requiring advocacy have been identified and discussed together" is Nigeria, (all at 93%), and "Organizations have participated in cluster advocacy activities" are Nigeria - Borno (82%)

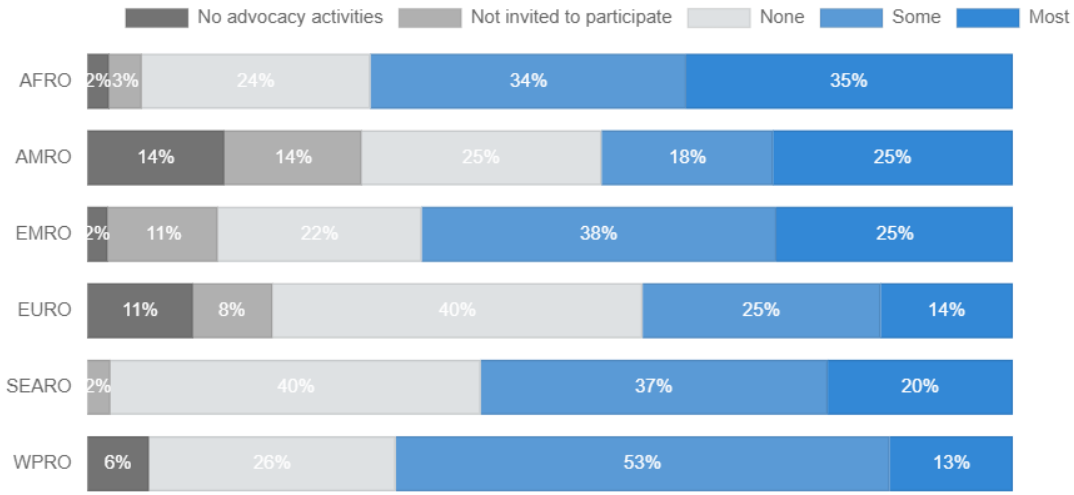
By the other hand, the HC with the lowest scores in "Issues requiring advocacy have been identified and discussed together" and "Organizations have participated in cluster advocacy activities" is South Sudan in both cases with 37%

Overall, the percentage of organizations that have participated in cluster advocacy activities is lower than the percentage that identified and discussed issues requiring advocacy. This suggests that there is room for improvement in terms of translating identified issues into action through advocacy efforts.

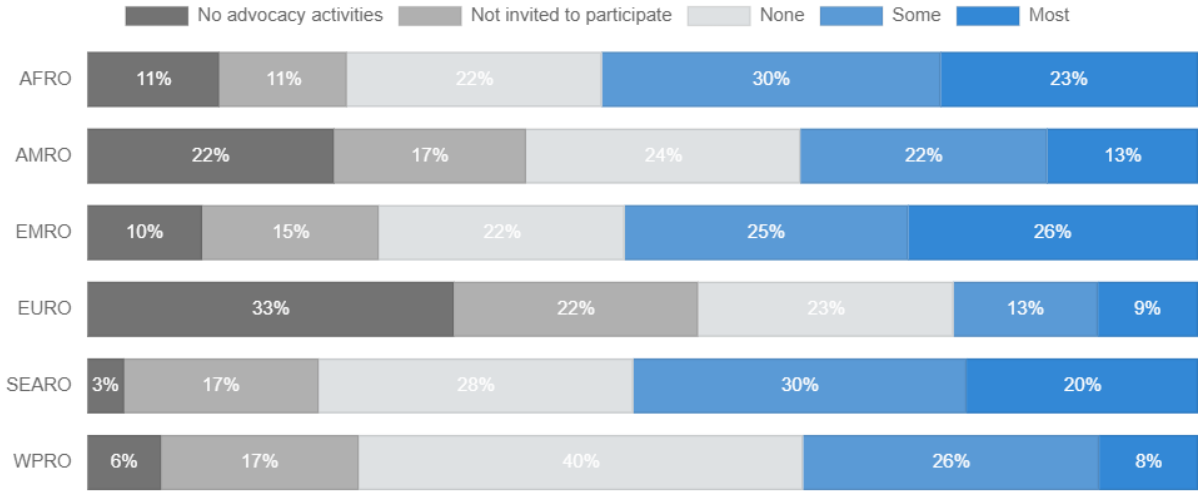
There is considerable variation in advocacy participation rates across countries, with some countries scoring very high (e.g. Nigeria, Syria and Bangladesh) and others scoring quite low (e.g. South Sudan, Venezuela, Ukraine).

In some cases, there are large gaps between the percentages of organizations that identified issues requiring advocacy and those that actually participated in advocacy activities. For example, in the Democratic Republic of Congo, only 46% of organizations participated in advocacy activities despite 72% identifying issues requiring advocacy.

There is generally less variation across regions in terms of advocacy participation rates compared to technical standards and planning. However, there are some exceptions, such as AMRO having lower participation rates than other regions in both identifying issues requiring advocacy and participating in advocacy activities.



Regional breakdown of responses to "Issues requiring advocacy have been identified and discussed together"



Regional breakdown of responses to "Organizations have participated in cluster advocacy activities"

Monitoring and Reporting on Implementation of HC Strategy and Results

	Cluster bulletins or updates highlight risks, gaps and changing needs	Program monitoring and reporting formats are agreed by the cluster	Has the cluster taken into account the distinct needs, contributions and capacities of women, girls, men and boys in its response and monitoring?
AFRO	82%	81%	80%
AMRO	73%	63%	70%
EMRO	84%	77%	82%

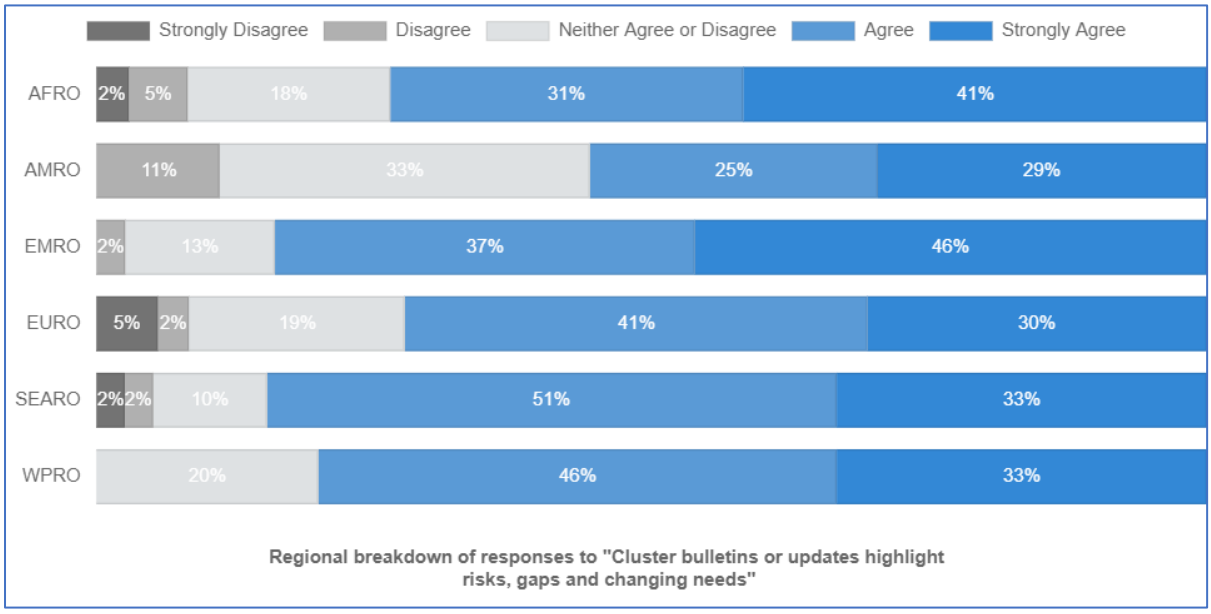
EURO	79%	69%	73%
SEARO	81%	75%	79%
WPRO	83%	69%	67%

- In general, the clusters have performed well in terms of highlighting risks, gaps, and changing needs in their bulletins or updates, with an overall average of 78%.
- The agreement of program monitoring and reporting formats by the cluster is also relatively high, with an overall average of 70%.
- The clusters have taken into account the distinct needs, contributions, and capacities of women, girls, men, and boys in their response and monitoring, with an overall average of 76%

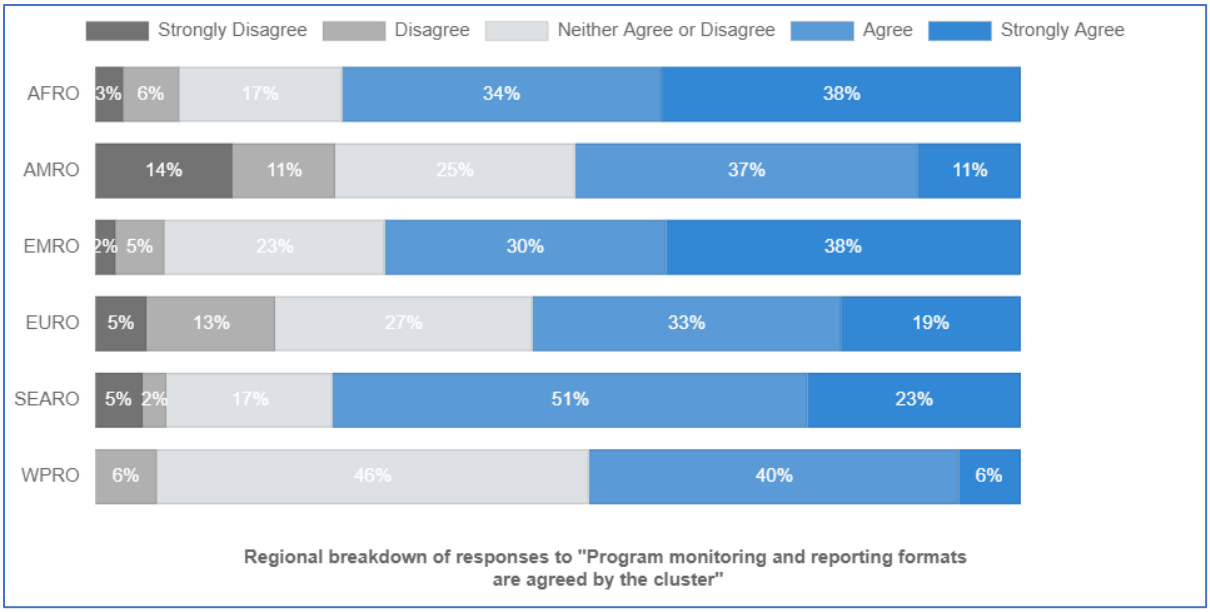
		Cluster bulletins or updates highlight risks, gaps and changing needs	Program monitoring and reporting formats are agreed by the cluster	Has the cluster taken into account the distinct needs, contributions and capacities of women, girls, men and boys in its response and monitoring?
AFRO	Central African Republic (CAR)	80%	79%	79%
	Democratic Republic of Congo	74%	68%	71%
	Ethiopia	78%	76%	76%
	Mozambique	81%	80%	75%
	Niger	84%	82%	76%
	Nigeria	80%	80%	80%
	Nigeria - Adamawa	85%	81%	85%
	Nigeria - Borno	93%	90%	88%
	Nigeria - Yobe	87%	87%	87%
	Somalia	85%	83%	84%
	South Sudan	79%	89%	87%
AMRO	Colombia	79%	64%	69%
	Venezuela	67%	62%	71%
EMRO	Afghanistan	93%	86%	86%
	oPt	82%	72%	83%
	Sudan	80%	72%	74%
	Syria-Damascus	89%	89%	89%
	Yemen	82%	75%	78%

EURO	Ukraine	79%	69%	73%
SEARO	Bangladesh	85%	82%	84%
	Myanmar	77%	68%	74%
WPRO	Papua New Guinea	83%	69%	67%
	Global	**81.91%**	**77.41%**	**78.91%**

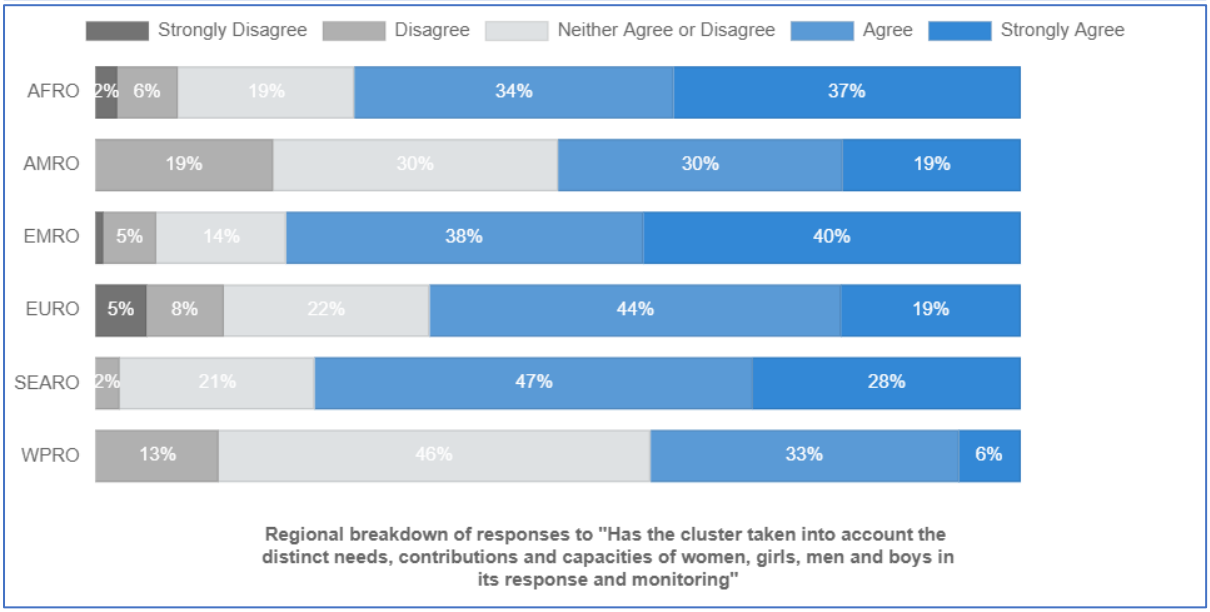
- The countries with the highest percentage of cluster bulletins or updates that highlight risks, gaps and changing needs are Nigeria-Borno and Afghanistan with 93%, followed by Somalia with 85%.
- The country with the highest percentage of program monitoring and reporting formats that are agreed by the cluster is Nigeria, and the finding is consistent between the hubs Adamawa, and Yobe with 80% in all cases.
- The countries with the highest percentage of the cluster taking into account the distinct needs, contributions, and capacities of women, girls, men, and boys in its response and monitoring are Syria and Afghanistan with 89%, followed by Nigeria with 85%.
- It is worth noting that Venezuela and DRC have a low percentage in all three categories.
- Overall, the dataset suggests that the majority of clusters in different regions have established program monitoring and reporting formats, with varying degrees of agreement among cluster members. The clusters have also taken into account the distinct needs, contributions, and capacities of women, girls, men, and boys in their response and monitoring.
- In terms of cluster bulletins or updates, most clusters in different regions have highlighted risks, gaps, and changing needs. However, there is some variability in performance across regions and countries. For example, clusters in the Central African Republic, Nigeria (Adamawa and Borno), Afghanistan, and Syria (Damascus) have high scores across all three indicators, while Venezuela has the lowest score for all three indicators.



Regional breakdown of responses to "Cluster bulletins or updates highlight risks, gaps and changing needs"



Regional breakdown of responses to "Program monitoring and reporting formats are agreed by the cluster"



Regional breakdown of responses to "Has the cluster taken into account the distinct needs, contributions and capacities of women, girls, men and boys in its response and monitoring"

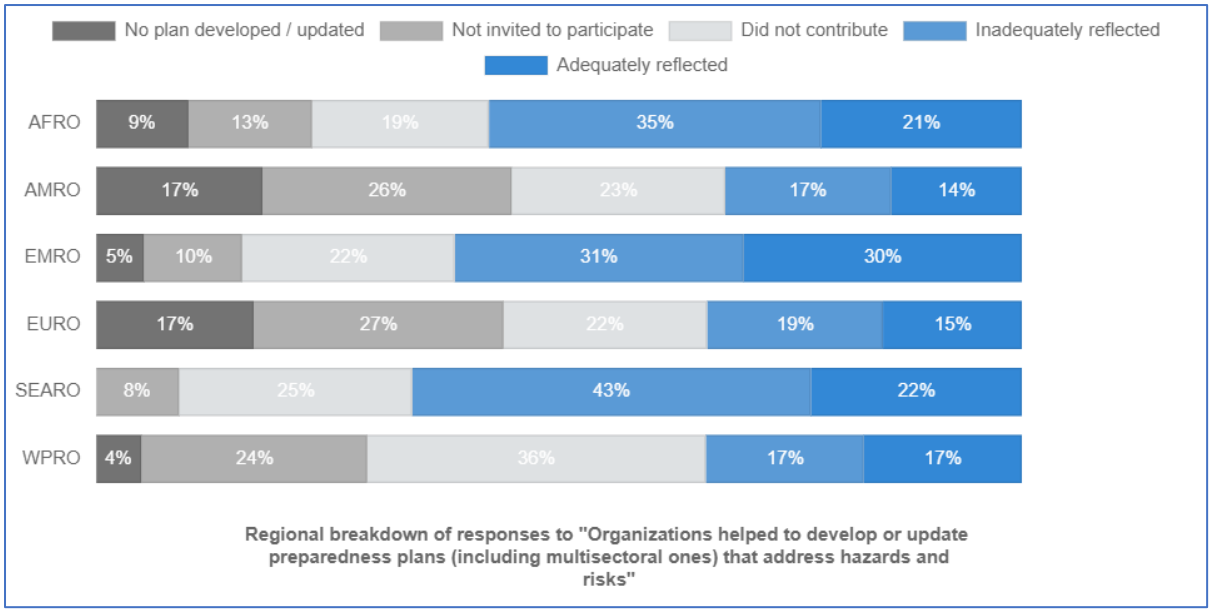
Preparedness for Recurrent Disasters

	Organizations helped to develop or update preparedness plans (including multisectoral ones) that address hazards and risks	Organizations committed staff or resources that can be mobilized when preparedness plans are activated
AFRO	72%	70%
AMRO	56%	57%
EMRO	75%	72%
EURO	58%	51%
SEARO	74%	72%
WPRO	63%	58%

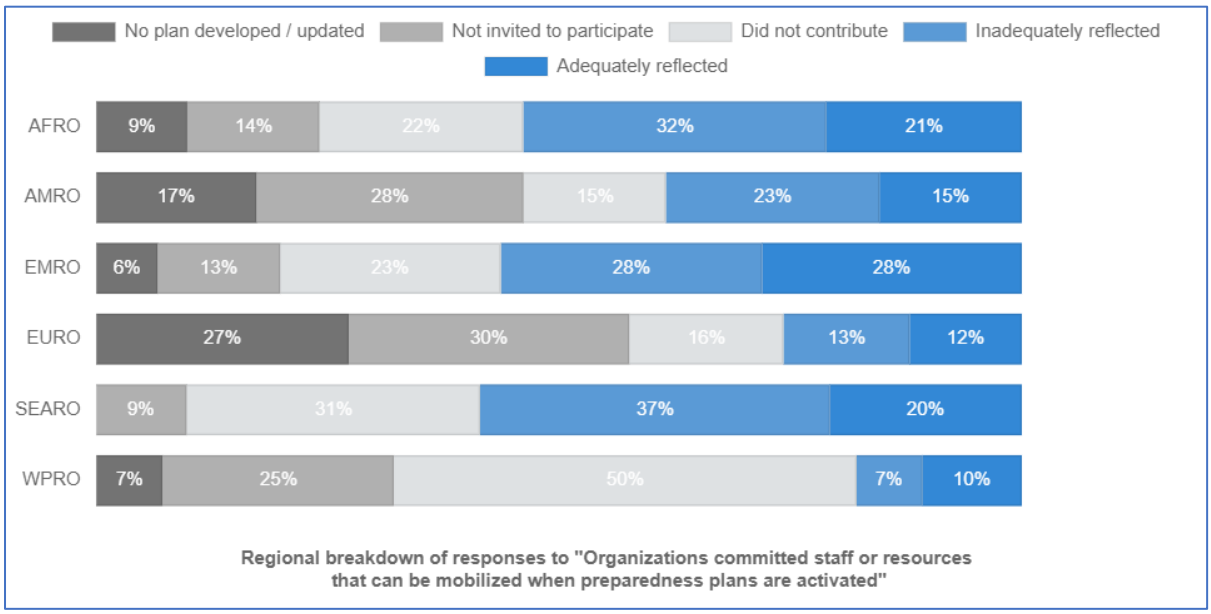
- In general, the level of preparedness for recurrent disasters is moderate, with all regions scoring above 50% in both indicators.
- The Eastern Mediterranean (EMRO) and Southeast Asia (SEARO) regions have the highest scores in both indicators, indicating a higher level of preparedness compared to other regions.
- The Americas (AMRO) and Europe (EURO) regions have the lowest scores in both indicators, indicating a lower level of preparedness compared to other regions.

		Organizations helped to develop or update preparedness plans (including multisectoral ones) that address hazards and risks	Organizations committed staff or resources that can be mobilized when preparedness plans are activated
AFRO	Central African Republic (CAR)	69%	65%
	Democratic Republic of Congo	56%	52%
	Ethiopia	67%	70%
	Mozambique	64%	62%
	Niger	65%	59%
	Nigeria	80%	80%
	Nigeria - Adamawa	70%	66%
	Nigeria - Borno	82%	76%
	Nigeria - Yobe	93%	93%
	Somalia	71%	78%
	South Sudan	79%	77%
AMRO	Colombia	58%	61%
	Venezuela	55%	53%
EMRO	Afghanistan	78%	74%
	oPt	76%	72%
	Sudan	77%	75%
	Syria-Damascus	85%	87%
	Yemen	65%	62%
EURO	Ukraine	58%	51%
SEARO	Bangladesh	81%	78%
	Myanmar	66%	66%
WPRO	Papua New Guinea	63%	58%
	Global	**70.82%**	**68.86%**

- Nigeria has the highest level of preparedness with 80% of organizations having helped develop or update preparedness plans, and 80% having committed staff or resources that can be mobilized when the plans are activated.
- DRC and Venezuela have the lowest level of preparedness, with only 40% of organizations having helped develop or update preparedness plans, and 39% having committed staff or resources that can be mobilized when the plans are activated.
- In general, the countries in the EMRO and SEARO regions have higher levels of preparedness compared to other regions, while the AMRO region has the lowest levels of preparedness.
- There is variation in preparedness levels even within a country. For example, in Nigeria, the preparedness levels are higher in Borno and Yobe compared to Adamawa.
- The global average for organizations having helped develop or update preparedness plans is 69%, and for organizations having committed staff or resources that can be mobilized when the plans are activated is 67.4%.
- The percentage of organizations that helped to develop or update preparedness plans (including multisectoral ones) that address hazards and risks ranged from 56% (in AMRO) to 74% (in EMRO and SEARO).
- The percentage of organizations that committed staff or resources that can be mobilized when preparedness plans are activated ranged from 51% (in EURO) to 72% (in EMRO and SEARO).
- At the country level, there is a considerable variation in preparedness levels across different countries and regions.
- Nigeria - Yobe had the highest levels of preparedness, with 93% of organizations committing staff or resources when preparedness plans are activated, and 93% helping develop/update preparedness plans.
- Overall, the data suggest that while a majority of organizations in most regions have taken steps to develop/update preparedness plans, there is still room for improvement in committing resources when plans are activated. Additionally, the wide variation across countries highlights the importance of tailoring preparedness efforts to address specific regional and national needs.



Regional breakdown of responses to "Organizations helped to develop or update preparedness plans (including multisectoral ones) that address hazards and risks"



Regional breakdown of responses to "Organizations committed staff or resources that can be mobilized when preparedness plans are activated"

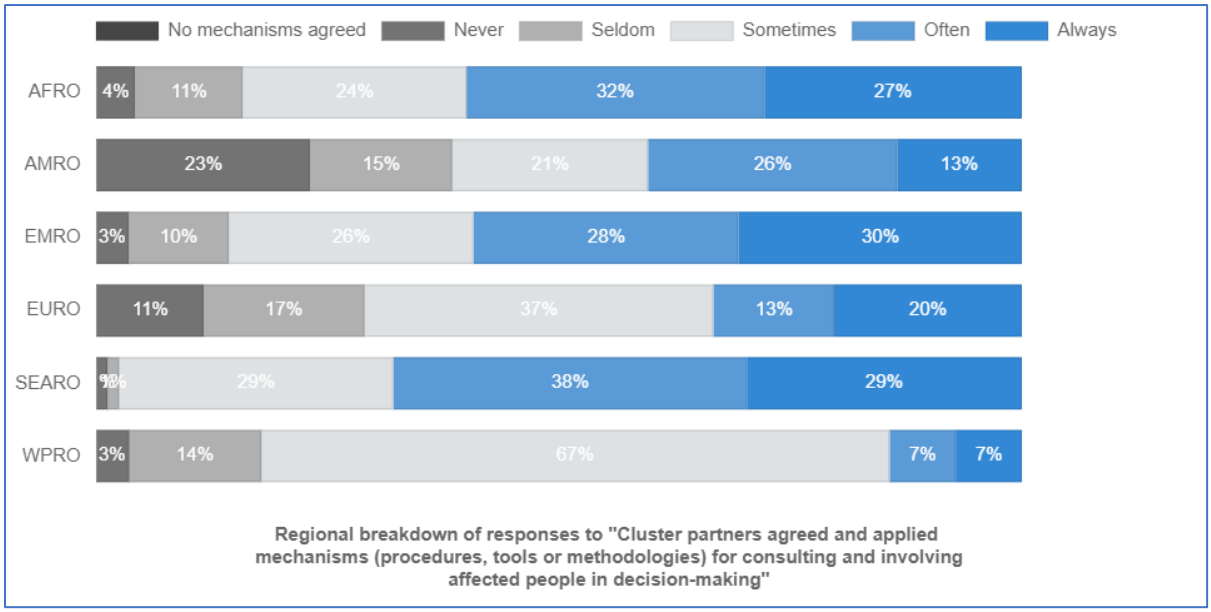
Accountability to Affected Populations

	Cluster partners agreed and applied mechanisms (procedures, tools or methodologies) for consulting and involving affected people in decision-making	Cluster partners agreed and applied mechanisms (procedures, tools or methodologies) to receive, investigate and act on complaints by affected people
AFRO	74%	74%
AMRO	58%	56%
EMRO	73%	74%
EURO	62%	61%
SEARO	77%	77%
WPRO	60%	59%

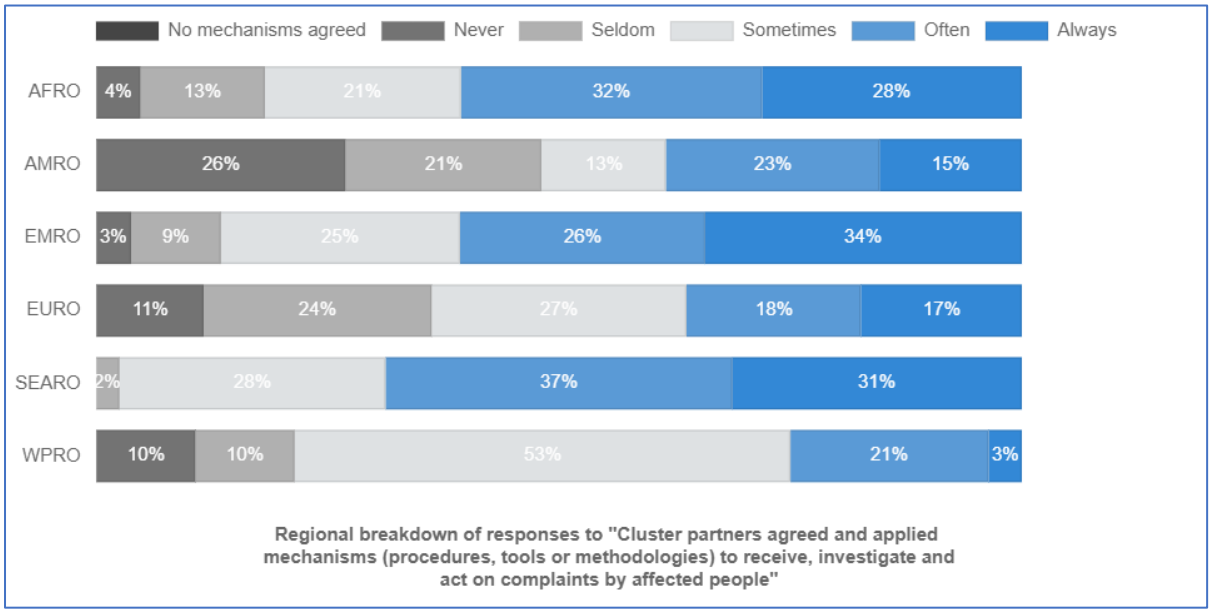
		Cluster partners agreed and applied mechanisms (procedures, tools or methodologies) for consulting and involving affected people in decision-making	Cluster partners agreed and applied mechanisms (procedures, tools or methodologies) to receive, investigate and act on complaints by affected people
AFRO	Central African Republic (CAR)	75%	74%
	Democratic Republic of Congo	66%	67%
	Ethiopia	68%	68%
	Mozambique	60%	63%
	Niger	67%	72%
	Nigeria	80%	80%
	Nigeria - Adamawa	81%	73%
	Nigeria - Borno	73%	73%
	Nigeria - Yobe	93%	93%
	Somalia	82%	80%
	South Sudan	80%	82%
AMRO	Colombia	60%	55%
	Venezuela	56%	58%
EMRO	Afghanistan	86%	85%
	oPt	66%	69%
	Sudan	74%	75%
	Syria-Damascus	82%	84%
	Yemen	68%	69%
EURO	Ukraine	62%	61%

SEARO	Bangladesh	83%	85%
	Myanmar	71%	70%
WPRO	Papua New Guinea	60%	59%
	Global	**72.41%**	**72.50%**

- At the regional level, SEARO had the highest percentage of cluster partners who agreed and applied such mechanisms for both decision-making and complaint management, with 77% for each. EMRO had the second-highest percentage for both categories, with 75% for decision-making and 76% for complaint management.
- At the country level, Nigeria and Afghanistan had the highest percentages for both decision-making and complaint management, with 80% and 86%, respectively: for decision-making and 80% and 85%, respectively, for complaint management. South Sudan had the lowest percentages for both categories, with only 40% for decision-making and 41% for complaint management. Overall, the global average for both decision-making and complaint management was around 70%.
- We can see that at the regional level, the average percentage of cluster partners who agreed and applied mechanisms for consulting and involving affected people in decision-making is highest in SEARO (77%) and lowest in AMRO (58%). The average percentage of cluster partners who agreed and applied mechanisms to receive, investigate and act on complaints by affected people is also highest in SEARO (77%) and lowest in AMRO (56%).
- At the country level, we can see that the percentage of cluster partners who agreed and applied mechanisms for consulting and involving affected people in decision-making varies from 56% in Venezuela to 93% in Nigeria-Yobe, with an average of 70.90% globally. The percentage of cluster partners who agreed and applied mechanisms to receive, investigate and act on complaints by affected people varies from 5541% in Colombia to 93% in Nigeria-Yobe, with an average of 70.65% globally.
- Overall, the data shows that there is still room for improvement in ensuring accountability to affected populations, as not all cluster partners have agreed and applied mechanisms for consulting and involving affected people in decision-making, or for receiving, investigating, and acting on complaints by affected people. However, progress has been made in many countries and regions, and there are examples of good practices in some areas.



Regional breakdown of responses to "Cluster partners agreed and applied mechanisms (procedures, tools or methodologies) for consulting and involving affected people in decision-making"



Regional breakdown of responses to "Cluster partners agreed and applied mechanisms (procedures, tools or methodologies) to receive, investigate and act on complaints by affected people"

5 CONCLUSIONS AND RECOMMENDATIONS FOR THE FOLLOWING - YEAR 2023

OVERALL

Based on the datasets, the areas with the highest performance were "Preparedness for Recurrent Disasters" and "Accountability to Affected Populations" at both regional and country levels. The lowest performing area at both levels was "Informing Strategic Decision-Making of the HC / Humanitarian Country Team".

- In terms of regions or countries that require more improvements, some of the lower performing countries/regions in multiple areas include Central African Republic, DRC, Ukraine, and Venezuela

- To improve the overall effectiveness of cluster coordination, some recommendations for the next year could include:
  - Strengthening support to service delivery: Cluster partners should prioritize higher adherence to standards, in the provision of services to affected populations, including addressing gaps in health, water and sanitation, shelter, and other essential needs.

  - Improving decision-making: Cluster partners should work to improve the timeliness, quality, and use of data to inform strategic decision-making of the HC/Humanitarian Country Team. Much greater effort must be made to increase the participation of organizations in joint situation analyses.

  - Enhancing planning and strategy development: Cluster partners should work to ensure that planning and strategy development processes are inclusive, transparent, and evidence-based, with the participation of all relevant stakeholders.

  - Strengthening advocacy efforts: Cluster partners, cluster coordination team and cluster lead agency should more pro-actively engage in advocacy efforts to raise awareness of the needs of affected populations and to promote the rights of the most vulnerable, including women, children, and people with disabilities.

  - Strengthening monitoring and reporting: Cluster partners should improve their monitoring and reporting mechanisms to ensure that they are capturing relevant information to assess the impact of cluster coordination efforts, identify gaps and challenges, and facilitate continuous improvement.

  - Increasing preparedness: Cluster partners should prioritize preparedness planning, including developing or updating preparedness plans that address hazards and risks, and committing staff or resources that can be mobilized when preparedness plans are activated.

  - Enhancing accountability to affected populations: Cluster partners should continue to work on improving accountability to affected populations by developing and implementing mechanisms for consulting and involving affected people in decision-making and for receiving, investigating, and acting on complaints by affected people.

It is important for cluster coordination partners to continue to work collaboratively to improve the effectiveness of cluster coordination in humanitarian response efforts.

- In terms of Support to Service Delivery, the data suggests that AMRO and WPRO had the highest levels of support provided to affected populations, while AFRO had the lowest levels.
- In terms of Informing Strategic Decision-Making of the HC/Humanitarian Country Team, EMRO and SEARO had the highest levels of support, while EURO had the lowest.
- In terms of Planning and Strategy Development, SEARO had the highest levels of support provided, while AFRO had the lowest levels.
- In terms of Advocacy, EMRO and SEARO had the highest levels of support provided, while AMRO had the lower levels.
- In terms of Monitoring and Reporting on Implementation of Cluster Strategy and Results, EMRO and SEARO had the highest levels of support provided, while EURO had the lower levels.
- In terms of Preparedness for Recurrent Disasters, SEARO had the highest levels of support provided, while AMRO and EURO had the lower levels.
- In terms of Accountability to Affected Populations, SEARO had the highest levels of support provided, while AMRO and EURO had the lower levels.
- It is important to note that these findings are based on aggregated data and may not reflect the situation in individual countries within each region.

The data suggests that there is room for improvement across all areas, and each region and country could benefit from tailored recommendations to address their specific needs and challenges.