IASC Inter-Agency Standing Committee

INTER–AGENCY REAL–TIME EVALUATION OF THE HUMANITARIAN RESPONSE TO THE EARTHQUAKE IN HAITI

20 MONTHS AFTER

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ACKNOWLEDGEMENTS

LIST OF ACRONYMS AND ABBREVIATIONS

CAP	Consolidated Appeal Process
CCCM	Camp Coordination and Camp Management
CDAC	Communication with Disaster Affected Communities
CMO	Camp Management Operations
CNSA	Coordination Nationale de la Sécurité Alimentaire
CNE	Centre National des Équipements
CO	Country Office
CSC	Coordination Support Committee
CTC	Cholera Treatment Centre
CTU	Cholera Treatment Unit
DAD	Development Assistance Database (DAD)
DINEPA	Direction Nationale de l'Eau Potable et de l'Assainissement
DPC	Direction de la Protection Civile
DSRSG	Deputy Special Representative of the Secretary General
ECHO	European Commission Humanitarian Aid and Civil Protection
ERC	Emergency Relief Coordinator
FAO	Food and Agriculture Organization
FTS	Financial Tracking System
GACI	Groupe d'Appui de la Coopération Internationale
GoH	Government of Haiti
ICG	International Crisis Group
IHRC	Interim Haiti Recovery Commission
GBV	Gender-based violence
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HQ	Headquarters
HIC	Humanitarian Information Centre
HRF	Haiti Reconstruction Fund
IA RTE	Inter-Agency Real- Time Evaluation
IASC	Inter-Agency Standing Committee
ICC	Inter-Cluster Coordination
ICRC	International Committee of the Red Cross
IDB	Inter-American Development Bank
IDP	Internally displaced person
IHRC	Interim Haiti recovery Commission
IM	Information management
IFRC	International Federation of the Red Cross
INFP	Institut National de Formation Professionnelle
IOM	International Organization for Migration
ISF	Integrated Strategic Framework
J/P HRO	J/P Haitian Relief Organization
MARNDR	Ministère de l'Agriculture, des Ressources Naturelles et du Développement Rural
MAST	Ministère des Affaires Sociales et du Travail
MENFP	Ministère de l'Éducation Nationale et de la Formation Professionnelle
MICT	Ministère de l'Intérieur et des Collectivités territoriales
MINUSTAH	United Nations Stabilization Mission in Haiti

MPCE	Ministère de la Planification et de la Coopération Externe
MTPTC	Ministère des Travaux Publics, Transports & Communication
MSPP	Ministère de la Santé Publique et de la Population
NGO	Non-governmental organization
OCHA	Office for the Coordination of Humanitarian Affaires
OHCHR	Office of the High Commissioner for Human Rights
PDNA	Post-Disaster Needs Assessment and Recovery Framework
RC	Resident Coordinator
SRSG	Special Representative of the Secretary General
TRIAMS	Tsunami Recovery Impact Assessment and Monitoring System
UN	United Nations
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNIFEM	United Nations Development Fund for Women
UN-HABITAT	United Nations Human Settlements Programme
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
UNOPS	UN Office for Project Services
WASH	Water, Sanitation and Hygiene
WatSan	Water and sanitation
WFP	World Food Programme
WHO	World Health Organization

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EXECUTIVE SUMMARY
Introduction

This report summarises the second phase of the Inter-Agency Standing Committee's Inter-Agency Real-Time Evaluation of the response to the Earthquake, twenty months after the disaster event. The earthquake that struck Haiti on January 12th 2010 had a drastic effect on the country's human and institutional public and the private sector capacity. An estimated 230,000 people lost their lives; 300,000 more were injured and over 1 million were left homeless.[1] The devastating humanitarian situation was compounded by Haiti's underlying vulnerabilities and high level of chronic poverty. In response, the international community mounted a massive humanitarian relief effort and fifty-five donors pledged a total of $4.59 billion in grants for 2010 and 2011 towards the rebuilding of the country.[2]

Given the scale of the disaster and subsequent humanitarian response, the Inter-Agency Standing Committee (IASC) launched a multiphase exercise to inform decision makers at national and headquarters levels, to draw lessons and allow corrections to be made where necessary. The Humanitarian Country Team (HCT) is intended to be the most immediate user of the feedback and recommendations of the evaluation.

The first phase of the Inter-Agency Real-Time Evaluation, completed in May 2010, covered the initial response. The second phase was initially foreseen to take place in October 2010[3] and focus in a forward-looking manner on inter-agency coordination problems or operational challenges during the transition phase. The process was postponed, due to the October 2010 cholera outbreak and the delays in starting the transition phase.

This second phase sought to:

- Analyse and provide lessons for the ongoing response, with a particular focus on coordination between different actors involved;
- Examine options for linking humanitarian response structures with longer-term and/or government-established mechanisms; and
- Analyse the extent to which the findings and recommendations from the first phase of the Inter-Agency Real-Time Evaluation have informed the evolving humanitarian response in Haiti.

Methodological Approach

The evaluation team[4] carried out the evaluation between August and October 2011, starting with an initial three-week country mission. The field work was followed by debriefings and meetings in Haiti and New York. A workshop on the preliminary findings of the evaluation was held in Port-au-Prince in advance of the Common Appeal Process (CAP) 2012 workshop. Additional data was gathered later in Haiti until the end of October 2011. Interviews were conducted with more than 250 individuals from Haitian institutions and international agencies (face-to-face interviews, focus groups and teleconferences) as well as with individuals and groups from the affected communities in different sites

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[1] GoH figures (estimates of the number of dead vary).
[2] Pledged at the March 2010 International Donors' Conference held in New York.
[3] Two scoping missions in March 2011 and July 2011 further fine-tuned the initial Terms of Reference.
[4] The team of three independent evaluators was reduced to two –one Haitian, one international- after the initial field phase of the evaluation.

in Port-au-Prince and Léogane and facing different situations[5]. An additional debriefing for IASC members was held in Geneva in December 2011.

Section 1 in the report explains the background, methodology and constraints of the evaluation. Findings are presented in sections two to five. Summary of findings and lessons learned are in section VI, conclusion in section seven, and summary of key findings and recommendations are brought together in section eight. A note on cluster transition, prepared for managers in the field in advance of the finalization of the evaluation, is presented in full in Annex 4.

Contextual Constraints on the Humanitarian Response

At the time of this evaluation, twenty months after the earthquake, the humanitarian response to the initial catastrophe has unfolded within a context of multiple crises, including a cholera epidemic, hurricanes, and political and security challenges. People who were already living in situations of poverty and vulnerability before the earthquake are now in a situation of severe need. Despite increasing constraints on funding, transition has been high on the agenda as a result of the growing desire to move away from humanitarian response and relief and to offer durable solutions to existing needs.

As phasing out of humanitarian aid did not go hand in hand with concrete steps towards recovery, speeding up the recovery and reconstruction process became a major priority in 2011. The absence of a government for much of the year 2011 and the fact that the work of Interim Haiti Recovery Commission (IHRC) was questioned (its mandate was due to expire in October 2011) resulted in prolonged uncertainty and institutional fragility. At the same time, there have been grounds for optimism linked to the newly elected President's leadership and elements of his programme. Vision, leadership and decision-making have been lacking in the past in Haiti. President Martelly's commitments on education and the 16/6 Project present both challenges and opportunities for positive change.

Achievements, Gaps and Challenges

By the end of 2011, the key achievements of the response have been: mainstreaming disaster preparedness; an effective response in camps, with populations largely free of cholera; recent progress on the rate of rubble removal, which had been a key obstacle for recovery; developments on transitional shelter solutions; implementation of integrated neighbourhood-based approaches; and progress on improving water and sanitation in the longer term.

There was considerable consensus amongst respondents on the deficiencies of the response and current existing gaps, with Haitian actors far more critical of the international response at this stage. The main shortcomings as perceived in August-October 2011 include: durable solutions; livelihoods; accommodation; communication; and provision of continued support to address remaining needs. International actors underlined that, despite the huge efforts deployed, many critical constraints have affected the overall response and the speed of recovery in this period.

In addition to existing contextual constraints, the humanitarian community in Haiti has been facing three main challenges:

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[5] Such as camp residents, relocates, evictees, affected remaining in neighborhoods, beneficiaries and non beneficiaries of houses repaired and transitional shelter, etc

- Acute humanitarian needs persist with only limited resources to address them. Operations are scaling down without sustainable solutions being in place.
- Assistance that does not favour durable solutions no longer meets Haitian expectations. Humanitarian goals are not always understood and the humanitarian community's methods and instruments (i.e. forms of assistance, the Humanitarian Country Team (HCT) as a decision-making body, the Consolidated Appeal Process (CAP), methods of needs assessment and monitoring) are repeatedly questioned.
- The aid coordination and delivery system has not been sufficiently rationalised or adapted to the fast-changing reality on the ground and the need for more interaction with other actors (e.g. Government of Haiti and development donors).

The evaluation has identified many areas where data collection, needs analysis, consultation and communication, inter-agency action and action with government need to be strengthened so that gains made so far are not lost as agencies wind down. The main informational challenge is having an overall assessment of needs that can better guide the response, prioritisation and appeals. More precise information on the needs of earthquake-affected populations and the extent of coverage is essential to plan the response as it moves forward.

The evaluation found that there is a lack of continuing capacity for assessing and cross-validating information. Inter-sectoral coordination has been regarded as weak by majority of interviewees and has not facilitated further take-up of either cross-cutting or multi-dimensional issues. A monitoring system recently established, with clusters quarterly reporting on progress against key indicators, is based exclusively on data emanating from the clusters; as each cluster has its own methods of data collection, consolidation of indicators and corroboration of data remains a challenge. At present the prevalent view among actors is that the process is too time-consuming and that the capacity for providing the information is often not suffcient. Information management systems require more buy-in, and should be expanded and connected to meet the needs of stakeholders and address progress on transition (i.e. achieving durable recovery solutions).

Transition is on the agenda but needs a vision, a strategy, a plan and leadership. The evaluation found that the coordination and planning mechanisms are not fully adapted to the current context. An overall aid coordination framework integrating all phases of assistance has been lacking. In an evolving environment where the vast majority of agencies are scaling down, roles and responsibilities are further blurred by the mismatch in the level of resources across humanitarian, development and governmental actors. There is a need for defining and understanding new roles and clarifying responsibilities in the move towards transition and development.

A major issue, consistently raised with evaluators, was limited funding available for humanitarian aid in the context of a project-driven recovery and reconstruction process. While a focus on life-saving activities is still required, with vulnerable populations facing multiple threats, the 2011 revised CAP is only 56 per cent funded and 60 percent of the government budget depends on international assistance. In September 2011, donors had only disbursed 43 percent of the $4.59 billion of the total pledged for recovery and reconstruction in the 2010–2011 timeframe.

The length of time required to achieve results was identified as a key limitation to planning for transition. The organisational structures of the main agencies are considered costly and not flexible enough, yet agencies still feel overstretched in their current capacities. With structures remaining intact and largely having to focus on addressing constraints rather than on achieving results, delays in progress

have consequences for costs. The response in Haiti has been more expensive than in other recent crises (e.g. Pakistan, Sri Lanka) and has far exceeded initial estimates, with projects reported as exceeding them by 2.5 to 3 times.

The response has been hindered by a lack of engagement in a genuine two-way communication and the effective support of Haitians, who feel sidelined and are increasingly critical of NGOs and the overall aid effort. The humanitarian community has been limited in its communications by not having a sufficiently clear understanding of Government of Haiti (GoH) recovery plans with respect to, for example, a resettlement strategy. While plans such as the Action Plan for the National Recovery and Development of Haiti were drafted in advance of the March 2010 donors' conference, they often lacked legitimacy within the country because of both the limited Haitian participation in their preparation and the 2011 change of government. The commitment of the new GoH and the need to progress from the initial humanitarian crisis response towards transition and longer term development present valuable opportunities for adjusting the current aid architecture in Haiti.

Follow-up to evaluation recommendations

While there was no formal follow-up or management response to the first phase of the IA RTE, progress has been made with respect to three of its main recommendations. First, the humanitarian community has incorporated in its response the challenges of mainstreaming disaster preparedness. Second, there is greater awareness of the need for humanitarian actors to adapt their response to the particular needs of an urban environment. Humanitarian efforts have continued to focus on neighbourhoods, and community-based integrated approaches are increasingly favoured and implemented. Third, specific recommended actions were taken to make the response more inclusive. These have not yet proven sufficient to effectively address the extent of the problem. Finally, the response did not manage to extend its coverage fully to the earthquake-affected populations in rural areas. Geographic coverage has been extended to some degree to meet some urgent needs in the countryside (mainly cholera).

The humanitarian community needs to improve utilization-focused approaches to evaluation. At this time in Haiti there are not enough examples of systematic follow-up to evaluations (e.g. by developing an operational plan based on recommendations and assessing progress 4 to 5 months later). Moreover, system-wide evaluations like Inter-Agency Real Time Evaluations should be better integrated into operational planning to be used effectively.

Key Recommendations

The recommendations below are intended to offer insights into how continuing and urgent humanitarian needs can be met as this transformation takes place.

1. Further engage with the new government and Haitian society to clarify and understand new priorities, objectives and strategies and better adapt the response and collective action.

- The humanitarian community, in coordination with development actors, needs to reengage with the new government and the Haitian society and take advantage of institutional changes – such as the New Housing Authority - to adapt its approach, better communicate its concerns and jointly define an action plan that addresses humanitarian priorities and provides clarity for transition. This includes reaching out to and involving the diaspora and the private sector (e.g. learning from initiatives like Soul of Haiti, and liaising with members of the Presidential Advisory Council).

- In the immediate term, the HCT in coordination with the UNCT, should task a small "lead" group (4-5 of relevant key leaders in the response) to approach the new Haitian government and to collaborate at the highest level in the clarification of concerns and priorities. The group should, if possible, have Red Cross participation and include OCHA, UNDP and UNICEF leadership.
- Either the recently formed advocacy working group or a new one should inform and follow-up on the processed described above and provide information to the "lead" group. By working with different levels of government and other Haitian actors, this group could eventually define a clearer road map to guide transition and address remaining needs. The group should include participation from protection cluster and Camp Coordination and Camp Management (CCCM)/shelter clusters.
- The international community in Haiti – HCT, UNCT, G12, Office of the Special Envoy, etc. - needs to convey the need for a coherent process for formulating an overall resettlement strategy and plan. Subsequently the plan should be supported and used to align efforts. The new Housing Authority in Haiti should be encouraged to define policy and strive to work within an agreed overall resettlement strategy.
- The HCT should also oversee a process to redefine an advocacy plan which would convey humanitarian concerns and encourage genuine two-way communication with affected populations and national NGOs.

To achieve this, additional leadership, decision- making and a stronger and more strategic HCT is needed, and high-level GoH presence at the HCT should also be considered. OCHA would also require additional support.

2. Reform and rationalise coordination to foster integration, advance humanitarian concerns and connect humanitarian action with other phases or "categories" (i.e. recovery, reconstruction and development) and stakeholders in the framework of an overall response.

- The HC/RC office should develop a proposal for establishing greater links between the CAP and the Integrated Strategic Framework (ISF), including joint monitoring of progress against established indicators and objectives.
- The HCT should further review its decision-making capacity and define its aspirations and targets for 2012 in terms of how it can engage with the GoH, development actors and Haitian civil society.
- "Transition and Recovery" as a topic should be a consistent agenda item at the HCT and in humanitarian donor coordination meetings. Similarly, humanitarian concerns should be a point of discussion in G-12 meetings.
- Had the IHRC's mandate been extended, their representation at the HCT should have been promoted and a "humanitarian aid issues" focus area created within the IHRC (i.e. treated in a similar way to DRR or other areas). OCHA's presence in Ministry of Planning meetings could be encouraged to ensure that humanitarian concerns are considered and progressively dealt with in a durable way.
- The HCT should encourage a new strategic multi-stakeholder exercise and planning process that includes representation from the humanitarian community, takes stock of the current situation and develops a more detailed plan for transition to recovery and development. This should be done separately and in advance of the CAP MYR exercise which focuses more narrowly on humanitarian needs and is not as inclusive or Haiti-specific.

3. Rationalise and transition the cluster system in Haiti

The process of proactive planning for cluster transition, based on objectives, should be continued. This

process should be jointly driven by OCHA , UNDP and UNICEF. Additional support should be sought and provided by the IASC at the global level, OCHA HQ, UNDP/BCPR on cluster transition and coordination on resettlement around key dates, outputs and milestones. The assessment for the rationalization and transitioning of clusters plan can be done through a fourfold process:

- A bottom-up approach to understand the array of geographically based coordination needs at a decentralised level, at all scales, from neighbourhood, to communal section, communal, departmental to national. UNDP has a role to play in supporting local governance and a stronger long-term coordination architecture.
- A review of future scenarios, understanding the plans and priorities of the GoH under the new presidency, such as new institutions like the Housing Authority. This should take account of the implications for coordination and the work carried out by clusters to date.
- A sector-by-sector analysis , leading to a sector-wide approach in support of a more coherent, seamless response, addressing humanitarian issues, recovery and development in parallel, as well as strengthening preparedness, decentralization and other cross-cutting issues.
- Specific concerted action for key cross-cutting and multi-dimensional issues identified.

4.   Consider funding, costs and efficiencies

The HCT and UNCT – supported by the group that was defined to coordinate project submissions to the IHRC - should oversee efforts that review, reassess and quantify funding gaps for both humanitarian action and adequate transition to recovery, and define a coordinated fundraising strategy.

- The ERC and HC should reach out to specific donors including at the HQ level to obtain funding and additional staff capacity in priority under-resourced areas like protection.
- The CAP instrument should be better utilized for fundraising, distinguishing between overall needs and the humanitarian community's capacity to deliver.
- Donors should provide flexible funding aligned with priorities outlined in joint humanitarian and recovery plans.
- The GoH and donors should emphasize the need for minimum transaction costs.
- Cost and efficiency considerations should be factored-in across the response. Recovery project implementation mechanisms that involve less overheads, reduced levels of subcontracting, and less lagtime for procurement and implementation should be considered.
- Given the cost of human resources, attention should be paid to prioritising the use of time and more efficient operational processes (e.g. faster drafting and approving of policy papers, limiting meetings, etc.)
- Human resource policies and practices, specifically for UN agencies, should be revised to become more flexible and better adapted to the needs of the response (e.g. hiring national staff, rapid short-term deployments, better use of existing rosters, etc.)

5.   Support capacity-strengthening and retain capacity in priority areas

- OCHA and Clusters need to continue to focus on building the capacity of national actors.
- Space for focusing on key humanitarian needs should be retained in a transition framework through a more connected OCHA (e.g. with increased presence in the recovery and development coordination efforts) and additional capacity at the level of the HC/RC office.
- DRR efforts should be prioritised over time and further integrated into development.

- More resources and capacity should be dedicated to protection issues through PROCAP with continued secondment of capacity to the protection cluster, and additional resources to work at the commune level.
- Cluster lead agencies should embed cluster coordination capacity in their programme to support counterparts and be in a position to help reactivate the cluster if needed.
- Global-level guidance should be sought on the multi-sectorial challenge of resettlement.

The table below summarises key findings and related recommendations of the evaluation.

Related findings and conclusions	Recommendations
The international community is keen on backing the new Haitian leadership and its commitments. (§23) Plans and objectives of the Government of Haiti are not always well known. (§54) There is a need to further align response to objectives of new government. (§54) Top positions in the Government of Haiti have found it difficult to engage with the humanitarian community. (§55) Engagement between the humanitarian community and government ministries has proven difficult without a new government in place. (§56) Haitian authorities have felt marginalised by the humanitarian response (§55) The priority for transitioning beyond post-earthquake humanitarian response remains defining a comprehensive resettlement policy. (§17) The goals and objectives of humanitarian response are not always understood. (§52) Two-way communication is missing. (§77)	**R1. Further engage with the new government and Haitian society to clarify and understand new priorities, objectives and strategies and better adapt response and collective action.** • The humanitarian community, in coordination with development actors, needs to reengage with the new government and Haitian society and take advantage of institutional changes –such as the New Housing Authority - to adapt its approach, better communicate its concerns and jointly define an action plan that addresses humanitarian priorities and provides clarity for transition. This includes reaching out to, and involving the diaspora and the private sector (e.g. learning from initiatives like Soul of Haiti, liaising with members of the Presidential advisory council). • In the immediate term, the HCT in coordination with the UNCT, should task a small "lead" group (4-5) of relevant key leaders to approach the new Haitian government and work with it at the highest level, to clarify priorities and concerns. The group should, if possible, have Red Cross participation and include OCHA, UNDP and UNICEF leadership. • To achieve this, additional leadership, decision-making and a stronger and more strategic HCT is needed. OCHA would also require additional support. High-level Government of Haiti presence at the HCT should also be considered. The recently formed advocacy working group or a new one should be formed to follow-up on and inform these processes, provide information to the "lead" group and work at other levels with the GoH and other Haitian actors, and eventually define a clearer road map that can further guide transition and address remaining needs. The group should include protection cluster and CCCM/shelter cluster participation.

	The international community in Haiti –HCT, UNCT, G12, Office of the Special Envoy, etc. - needs to coherently convey the need for and consequently support a process of formulating an overall resettlement strategy and plan that can be supported over time and help align efforts. The new Housing Authority in Haiti should strive to work under an agreed resettlement strategy and help define this policy. The HCT should also oversee a process that involves redefining an advocacy plan to convey humanitarian concerns, and encourage a two-way communication with affected populations and national NGOs.
An overall aid coordination system has been absent. (§63) There has been limited interaction between recovery and humanitarian coordination frameworks. (§64) New frameworks and approaches are needed to overcome weaknesses in coordination across sectors. (§63) The main objectives have yet to be defined for an overarching transition plan that incorporates the humanitarian response. (§68) There is lack of clarity on the thresholds of humanitarian response. Emergency response and development needs are intertwined. (§59, §61) There is no collective interaction between humanitarian donors and their development counterparts. (§63) There is limited take-up of humanitarian concerns in longer-term development efforts. (§63) The humanitarian response has helped pilot approaches for recovery that can be continued and replicated. (§ 62) Assistance is being phased out without an	**R2. Reform and rationalise coordination to foster integration and advance humanitarian concerns and connect humanitarian action with other phases or "categories" (i.e. recovery, reconstruction and development) and stakeholders in the framework of an overall response.** As a start, the HC/RC office could develop a proposal for establishing greater links between the CAP and the ISF, including joint monitoring of progress against established indicators and objectives. • The HCT should further review its decision-making capacity and define its aspirations and targets for 2012 in terms of how it can engage with the Government of Haiti, development actors and the Haitian civil society. • "Transition and Recovery" as a topic should be systematically made an agenda item at the HCT and humanitarian donors coordination meetings. Similarly, humanitarian concerns should be a point of discussion in G-12 meetings. • Had the IHRC's mandate been extended, their representation at the HCT should have been promoted and a "humanitarian aid issues" focus area created within the IHRC (i.e. in a similar way as DRR or other areas are considered). OCHA's presence could be encouraged in Ministry of Planning meetings to ensure that humanitarian concerns are considered and progressively dealt with in a durable way. • The HCT should encourage a new strategic multi-stakeholder exercise and planning process that includes representation from the humanitarian community, takes stock of the current situation and develops a more detailed plan for transition to recovery and development. This should be separate from and done in advance of the

effective hand-over strategy. Recovery efforts are not picking up on major areas of need that have been covered by the humanitarian community. As a result, continuing humanitarian needs are largely unmet. (§59, §60)	CAP MYR exercise which more narrowly focuses on humanitarian needs and is not as inclusive and Haiti specific.
There has been much recent progress on planning for cluster transition. UNICEF has played a key role in advancing cluster transition (§69) The cluster system and the IHRC face difficulties in rectifying the initial lack of inclusiveness and limited Haitian ownership. (§66) Involvement of Haitian NGOs has been largely unsuccessful. (§66) Focusing on sectoral tables for cluster transition is too limited an approach. (§70) The current system can be further rationalised through merging key objectives of the response. (§68) The system is not yet adapted to geographically based coordination (§70) Information management has to be reviewed in line with outcomes based coordination and information needs. (§73) An overall needs assessment system is absent, and the existing system is highly dependent on the cluster framework. (§73) Mayors have played a key role in the response. (§27, §68, §25) Cross-sector and inter-cluster coordination have been weak. (§28, §65)	**R3. Rationalise and transition the cluster system in Haiti** Continue proactive planning for cluster transition based on objectives. This process should be jointly driven by OCHA , UNDP and UNICEF. Additional support should be sought and provided by the IASC at the global level, OCHA HQ, UNDP/BCPR on cluster transition and coordination on resettlement around key dates, outputs and milestones. The assessment for the rationalization and transitioning of clusters planning can be done through a fourfold process: • A bottom-up approach to understand the array of geographically based coordination needs at a decentralised level, at all scales, from neighbourhood, to communal section, from departmental to national. UNDP has a role to play in supporting local governance and a stronger long-term coordination architecture. • A review of future scenarios, understanding plans and priorities of the Government of Haiti under the new presidency, and plans for new institutions like the Housing Authority. Also to understand the implications for coordination and the work carried out by clusters to date. • A sector by sector analysis for a sector-wide approach in support of a more coherent, seamless response that addresses both humanitarian issues and recovery and development, as well as strengthening preparedness, decentralization and other cross-cutting issues. • Specific concerted action for key cross-cutting and multi-dimensional issues that tackle important priorities that are fundamental to address humanitarian needs, phase-out assistance (e.g. resettlement and livelihoods) and make way for a coherent framework for coordination.

There is insufficient funding available for the humanitarian response and recovery (i.e. contributions to the CAP and the HRF). (§ 43) The response is costly and its cost has been underestimated. (§38, §46) The CAP's effectiveness as a tool for fundraising is questionable. (§43) IHRC is not considered to be a cost-efficient structure. (§21) Areas like protection are under-resourced. (§37) Lack of funding prospects acts as a disincentive to planning transition. (§59)	**R4. Consider funding, costs and efficiencies** • The HCT and UNCT –supported by the group that was defined to coordinate project submissions to the IHRC - should oversee efforts that review, reassess and quantify funding gaps for both humanitarian action and adequate transition to recovery and define a coordinated fundraising strategy. • The ERC and HC should reach out to specific donors at the HQ level to obtain funding and additional capacity through staff secondments in priority under-resourced areas like protection. • Donors should provide flexible funding commensurate to priorities outlined in joint humanitarian and recovery and plans. • The Government of Haiti and donors should underline the need for minimum transaction costs. • Make better use of the CAP instrument for fundraising. Distinguish between overall needs and the humanitarian community's capacity to deliver. • Factor-in cost and efficiency considerations across the response. Reconsider recovery project implementation mechanisms in favour of less overheads, reduced levels of subcontracting, and less lagtime for procurement and implementation. • Given the cost of human resources, attention should be paid to effectively managing the use of staff time and using more efficient work processes (e.g. ensuring efficient processes for drafting and approving policy papers, limiting meetings, etc.) Human resource policies and practices for UN agencies should be revised to become more flexible and better adapted to the needs of the response (e.g. hiring national staff, rapid short-term deployments, etc.)

Haiti faces multiple vulnerabilities (§16) and not all elements of DRR have been considered in the response. (§36)	**R5. Support capacity-strengthening and retain capacity in priority areas**
The ability to tackle issues has depended on information available, whether there is a dedicated cluster, sub-cluster, working group or human resource capacity. (§35)	• Prioritise DRR efforts over time which should be further integrated into development. OCHA/Clusters need to continue to focus on building the capacity of national actors.
Protection at this key juncture is viewed as increasingly critical. (§37)	• Ensure that space for focusing on key humanitarian needs is retained in a transition framework through a more connected OCHA (e.g. with increased presence in the recovery and development coordination efforts) and additional capacity at the level of the HC/RC office.
The absence of a resettlement policy has been a major gap. (§33)	• Dedicate more resources and capacity to protection issues at this key juncture, through continued secondment of PROCAP capacity to the protection cluster, and provision of additional resources to work at the commune level.
National capacities are still weak. (§42)	• Seek global-level guidance on the multi-sectorial challenge of resettlement.
Capacity-building takes time, goes hand-in-hand with engagement and is necessary for the sustainability of efforts. (§ 56, § 59)	• Cluster lead agencies should embed cluster coordination capacity in their programme to support counterparts and be in a position to help reactivate the cluster if needed. UN human resource practices should be reviewed to make better use of existing rosters, allow for temporary redeployment, considering the capacities of partners and to be better able to place Haitian staff in key positions.

MAIN REPORT

I.   Introduction

I.1   Background and Aim of the Evaluation

1.   On the 12th of January 2010, an earthquake of magnitude 7.0 struck Haiti's West province, near Léogâne, affecting the capital Port-au-Prince and surroundings. The earthquake had devastating effects and according to the Haitian government, resulted in approximately 230,000 deaths, 300,000 wounded, and over two million displaced persons. A massive response was mounted to face both the immediate situation and establish a bridge towards recovery. Constant challenges – including issues with land tenure, limited government capacity, psychological trauma, crime, extreme poverty, protection issues, a completely overburdened infrastructure system, and the array of actors involved - foreshadowed the long and difficult path ahead for Haiti.
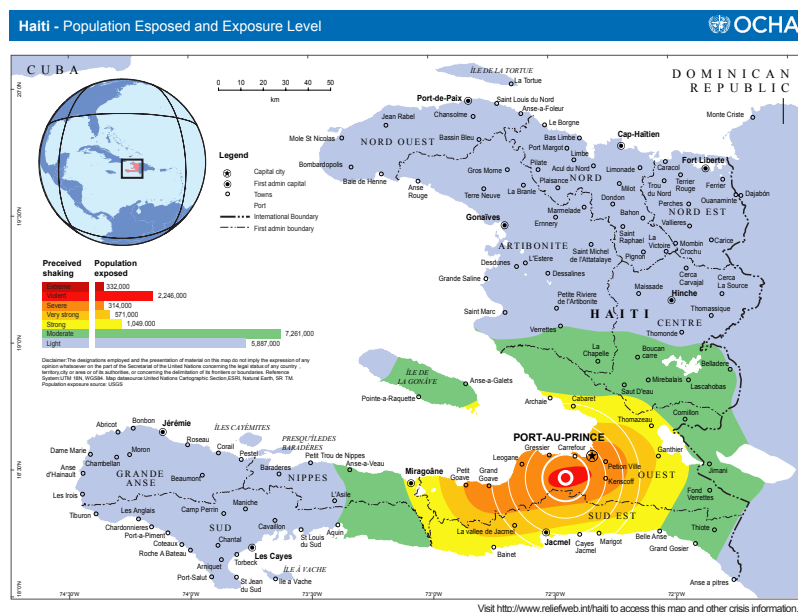
2.   In view of the magnitude of the disaster and the subsequent response, the Inter-Agency Standing Committee (IASC) launched a multi-phase Inter-Agency Real-Time Evaluation (IA RTE) for the country, to assess the disaster response, inform decision makers, draw lessons and allow corrections to be made, in real time when necessary. The first phase took place three months after the earthquake and evaluated the initial response. The IA RTE mission in August–September 2011 is part of the second phase of the evaluation, with the main objectives to:

- Analyse and provide lessons for the ongoing response, with a particular focus on coordination between the different actors involved;
- Examine options for linking humanitarian response structures with longer-term and/or government-established mechanisms; and
- Analyse the extent to which the findings and recommendations from the first phase of the Inter-Agency Real-Time Evaluation have informed the evolving humanitarian response in Haiti.

3.   Based on the key evaluation questions for the second phase of the IA RTE[6] this report focuses on four main areas of the response:

- Main achievements, gaps and constraints
- Coherence, connectedness and sustainability of the response
- Coordination and transition
- Information

I.2   Methods, Scope and Strengths and Weaknesses of the Evaluation

I.2.1.   Background

4.   As per the Terms of Reference of the IA RTE of the Humanitarian Response to the Haiti Earthquake, the second phase of the evaluation was to commence six to seven months after the initial mission and reflect upon relevance, effectiveness, efficiency and coverage during the transition phase of the response. The process was postponed, due to the October 2010 cholera outbreak and the delays in starting the transition phase. The second phase of the IA RTE in the end occurred fourteen months after the initial first phase mission, from August to October 2011, with the terms of reference fine-tuned over the course of two field visits that took place in March and July 2011.[7]

In practice, however, the second evaluation phase was timely in that the transition process was very much on the agenda of the humanitarian actors in Haiti. The main difficulty at this later stage was the evaluation's lack of capacity to influence the process, given funding challenges, capacity constraints and downscaling or finalising of humanitarian operations in Haiti.[8] Evaluators also faced some difficulties arranging meetings with the Haitian authorities and other key stakeholders during the field phase of the evaluation.

1.2.2.   Methods

5.   The findings of the evaluation are based on a triangulation process[9] drawing on six types of largely qualitative sources of information:

- semi-structured interviews with over 250 key stakeholders on an individual or small group basis in Haiti, Panama and New York,[10]

Stakeholder group	Number of persons interviewed

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[6] See Terms of Reference in Annex.

[7] The first mission included representatives from OCHA and UNICEF on behalf of the Management Group for the evaluation; the second mission was conducted by the evaluation manager, accompanied by the international consultant for the evaluation.

[8] For this reason, a number of findings and conclusions would not have recommendations at this later stage.

[9] Evaluators used triangulation and drew on multiple sources to ensure that the findings could be generalised to the response and were not the results of bias or the views of a single agency or type of actor.

[10] The full list of persons interviewed is available in Annex number 9. Evaluators did not manage to obtain additional meetings with GoH representatives or the IHRC in Haiti through UN agency contacts but met with authorities when observing the CGI Haiti Action Network meetings in New York and the Inaugural Assembly of the Presidential Investment Advisory Board in September 2011.

Haitian authorities	12
Haitian NGOs	67
Beneficiaries/affected populations during project visits	54
UN agencies	58
IFRC	5
International NGOs	25
Donors	12
World Bank/HRF	4
Other International	15
Total	252

- observation of meetings in Haiti and New York,
- six focus groups,
- field visits in the area of Port-au-Prince and Leogane,
- feedback from a one-day workshop held in Port-au-Prince in advance of the CAP workshop, where evaluation findings and transition related issues were presented,
- a comprehensive document and data review process.

6.   Over one thousand documents mainly accessed via internet, the DRLA Haiti Humanitarian Aid Evaluation Database and UNICEF were consulted to gather information, compare and contrast data and establish timelines.[11] These included strategic plans, evaluation reports, surveys, project documents, minutes of meetings and other reports and information available on Haitian government, clusters, OCHA Haiti response and NGO websites. Using triangulation, evaluators were able to comprehensively address the majority of evaluation questions and validate findings in a systematic manner. As one of seven focus areas, the team set out to gather responses and views on the level of information available for evidence-based decision-making and information management. It is on this issue that evaluators found that there was less information and sources for proper cross-validation.

I.2.3.   Timeline

7.   The field phase of the evaluation in Haiti started in August 2011 and initially lasted three weeks.[12] Additional meetings were undertaken until the end of October 2011. An initial IASC preliminary debriefing took place in NY on September and later in Geneva in December 2011. CAP related findings were also shared in advance with OCHA and with participants attending the September CAP 2012

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[11] See Annex number?? on meetings. First phase provided a baseline against which to assess progress. Haiti December 2009 Cluster case study gives an overview of the pre-earthquake structure and similar issues.
[12] While the evaluation team was initially composed of one national consultant and two international evaluators, one of the international evaluators had to drop out after the initial field phase. There were, however, only two interviews that this consultant conducted alone.

workshop. The lead evaluator attended Haiti-related meetings in New York in September 2011 (e.g. Clinton Global Initiative, Haiti Action Network and Martelly's Presidential Investment Advisory Council). A note for the Cluster transition in Haiti was submitted on October 31st 2011, to inform the ongoing processes in lieu of the draft evaluation report. The initial draft of the report of the IA RTE phase 2 was submitted on November 10th 2011 and comments provided by the Advisory Group on the 7th of December 2011.

I.2.4. Strengths and weaknesses of the approach

8. The evaluation relied on mainly qualitative methods. A survey of affected population's perceptions of the *overall inter-agency response* in Haiti, which was to form a part of the evidence-base for the second IA RTE, was delayed and ultimately cancelled. The evaluation considered the results of the intentions survey among earthquake displaced people living in camps released by IOM, ACTED and Communicating with Disaster Affected Communities (CDAC) Haiti.

9. The evaluation sought information from different settings and categories of affected population through purposive selection interviews (with population in neighborhoods and transitional shelters, owners, renters, people living in camps, evictees, yellow house repair beneficiaries, people that were relocated, beneficiaries in different communes of Port-au-Prince and Leogane, etc.). Affected population views on the response and current concerns were highly correlated across categories and evaluators feel confident that they have, through interviews and focus groups, accurately captured Haitian views of the response.

10. A focus group with Haitian national staff working on the response was held during the field segment of the evaluation, in order to prioritise Haitian views (see annex).[13] For consistency, this second phase also sought to follow one of the methods of the first phase when using information received through consultations with the affected population. The RTE identified key issues at the level of both directly and indirectly affected population (outcomes) and traced them back through service deliverers. At the time of the second evaluation phase, however, there was very little to trace back, as the bulk of the affected population was no longer receiving any form of assistance and many agencies had phased-out their aid or withdrawn. In some instances, the evaluators were not able to verify problems through service deliverers as they were no longer in the country or accessible[14].

11. The evaluation faced other challenges related to the extent and focus of some of the questions contained in the ToR. IA RTEs are meant to place greater emphasis on processes and immediate lessons learning than on impact evaluation and accountability. The questions in the ToR focused on to a greater extent on past achievements, performance and accountability, rather than on learning at the national level.

12. As the Humanitarian Country Team (HCT) is the most immediate user of the process and recommendations of IA RTEs, the level of involvement and ownership in the field is a key to a successful IA RTE. However, support to the role of the evaluators during the field phase was limited, as the evaluation was not closely tied to the ongoing strategic work of the Humanitarian Country Team and the

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[13] This focus group was suggested by Save the Children's Country Director in a meeting with the CCO in July 2011. For a summary on the contents of the meeting see Annex ?? number.

[14] Among those are two girls raped in Camp Jean Marie Vincent that were referred by IOM to a health facility but who came back without receiving treatment, as well as several cases of poor transitional housing.

wider aid framework in Haiti. The IA RTE Advisory Board and a majority of the Humanitarian Country Team members were engaged in the evaluation on an individual level but not so much as a group. The evaluation was presented at the HCT but there were no opportunities to discuss it in detail, as the HC and the humanitarian community were overstretched with the Consolidated Appeal Process (CAP). The person initially responsible for the evaluation within the office of the Humanitarian Coordinator/Resident Coordinator (HC/RC) and tasked with gathering of information on recommendations emanating from evaluations and their follow-up left Haiti. Actors involved in recovery and reconstruction efforts were not sufficiently engaged in an evaluation which, although focused on transition, was still perceived as a humanitarian or at times OCHA-driven exercise.

13. The IA RTE highlights the main points related to key evaluation questions, but also provides a "snapshot" of the situation at the time field work was conducted. An in-depth assessment the activities undertaken since May 2010[15] could not be undertaken given the weak monitoring and evaluation systems in place. Certain questions in the IA RTE TORs dealing with accountability were difficult to address in the context of Haiti, where information available on overall needs and response is limited. The level of institutional uncertainty at the time of the evaluation also affected its ability to define more specific recommendations and to be more forward looking.

14. Recognising that one key characteristic of an IA RTE is that it can affect programming as it happens, the evaluation sought to be useful and focus on issues of practical implementation. A workshop was held in Port-au-Prince with multi-stakeholder groups in advance of the Consolidated Appeals Process (CAP) workshop, in which key evaluation issues were discussed. Content that emerged from both the IA RTE and CAP workshops were used to further cross-validate findings. Many of the inputs of the IA RTE workshop working groups were subsequently taken into account in the evaluation. As part of the IA RTE, a note on cluster transition was prepared for managers in the field in advance of this report, based on issues raised in the working group on cluster transition.[16] The workshop supported learning but did not result in prioritized recommendations that could be the basis of an action plan with identified timeframes and responsible organizations.

15. As it has been conducted over a year and a half after the earthquake, this IA RTE differs in scope and focus from other similar exercises. It has focused heavily on transition issues and provides a snapshot of a situation shaped by a response that has been evolving over a longer period of time and has been influenced by a multitude of factors.

I.3   Context

Remaining acute humanitarian needs

16. At the end of 2011, the humanitarian situation in Haiti remains a challenge and still requires international support. At the time of the evaluation, the ERC determined priority humanitarian needs in Haiti over the coming year as being: access to safe drinking water, sanitation and food, and guarding against gender-based violence and forced evictions from camps.[17] The situation remains fragile, marred by the chronic structural issues that affected it even before the earthquake (Port-au-Prince had no city

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[15] References in the report to specific projects or sectors should be regarded as examples used to illustrate a finding and not to specifically single out an organisation or activity.
[16] See Annex 4.
[17] In September 2011, nearly 70,000 people had been evicted from camps without alternative durable solutions.

planning and a deficit of housing for 300,000 people). According to IOM data, despite a sharp decrease in the camp population (at a rate that has been declining since March 2011) over 550,000 Haitians live in approximately 800 displacement camps scattered mostly around the capital, Port-au-Prince (see Figure 1). There are continuing humanitarian needs, including protection concerns. A focus on life-saving activities is still required with vulnerable populations facing multiple threats, such as food insecurity, cholera and natural disasters (mainly frequent heavy rains and hurricanes).[18] At the same time, humanitarian donors have drastically reduced their funding in Haiti and the vast majority of organisations have run out of resources and are phasing out or have already ceased their activities.[19] The Government of Haiti lacks the means to take over key services such as cholera treatment centres and sanitation. Humanitarian donors would prefer that recovery and development efforts cover these ongoing needs.

Figure 1: Internally displaced persons (IDP) in recorded sites
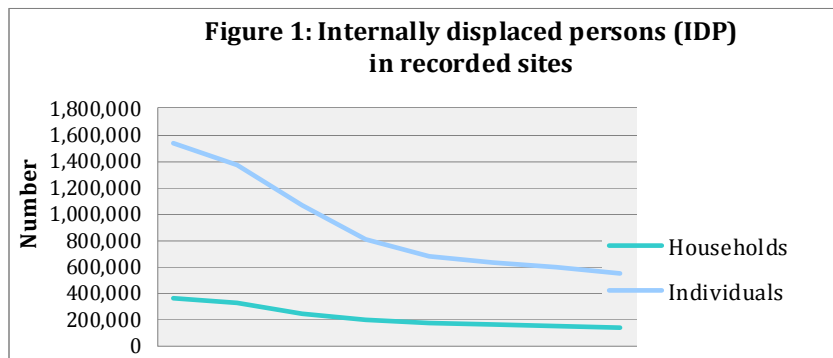
Source: IOM HAITI Camp Coordination Camp Management Cluster DTM v2.0
Update – July-September 2011 Displacement Tracking Matrix V2.0 Update September 30, 2011

Continuing uncertainty and fragility

17.   Political instability and uncertainty continued to affect Haiti in 2011. The country was without a government until October of that year, and the mandate of the Interim Haiti Recovery Commission (IHRC) expired that same month. The new Prime Minister reportedly sought its renewal but also wanted to strengthen the Ministry of Planning and Cooperation. While the mandate of the United Nations Stabilization Mission in Haiti (MINUSTAH) has been renewed with the support of the President, its presence is increasingly questioned. Since the disaster, the country has had a negative annual growth rate of minus 8.5 percent in 2010. Sixty percent of the Haitian budget continues to depend on international assistance. Haiti's present scenario is still explained by a lack of leadership, decision-making on key issues, and an effective Government of Haiti-led plan for recovery. The main priority and challenge for transitioning from the post-earthquake humanitarian response remains the definition of a comprehensive resettlement policy.

Transition strong on the agenda, complicated in practice

18.   Transitions are usually characterized by a shifting emphasis from life-saving activities to restoring

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[18] 45% of the population faces food insecurity, the cholera epidemic has so far infected 450,000 people and claimed more than 6,500 lives.
[19] The 2011 revised CAP is only 56% funded. Key agencies like OFDA no longer have funding forecasted for Haiti.

livelihoods, achieving development goals, and an increasing reliance on national ownership through national development strategies. There is recognition that the focus on transition should take place immediately after a disaster. Transitioning is regarded as essential to avoid creating a situation of dependency.

19.   The Government of Haiti had officially set the end of the relief phase for July 2010 but later extended the distribution of food aid until September of that year. Cholera and the 2010 hurricane season maintained the focus on the humanitarian emergency. Although speeding up the reconstruction and recovery effort has been the priority in Haiti for 2011, the progress has been slow. For some, transition is on the agenda but not necessarily as a result of a planned process but of fatigue (on the part of the affected population, authorities, implementing agencies and donors who all want to see change, tangible results and durable improvements). For the vast majority of those interviewed (approximately 90 percent) reconstruction has not visibly begun. The means and activities of international NGOs are increasingly singled out as a significant problem by the new government.

20.   At the International Donors Conference: "Towards a New Future for Haiti", held in New York on 31 March 2010, 55 donors (national governments and multilateral institutions) pledged a total of $4.59 billion for recovery and development aid programmes. For the combined 2010–2011 timeframe, donors had in September 2011 disbursed 43 percent of this total ($1.97 billion). An additional $2.08 billion has been committed.

21.   The Interim Haiti Recovery Commission (IHRC) was set up in April 2010 to cover the recovery agenda for limited 18--month period (i.e. until October 2011). The Commission has been described as a "cumbersome structure with a complicated decision--making process and high operating costs, whose focus on projects has also restricted its ability to operate with strategic planning and oversight." Notwithstanding its heavy and sluggish procedures, international stakeholders interviewed felt that the Interim Haiti Recovery Commission (IHRC) was at the time of the evaluation at the point where one would have wanted it to be a year ago, with a competent and dedicated team. Indeed, in May 2011 the IHRC was deemed as "not fully operational due to delays in staffing the Commission and defining the role of its Performance and Anticorruption Office" and its limited ability to direct funding to Haitian priorities, "in part because those priorities have not been clear". Several donors and UN agencies were, at the time of the evaluation, considering how best to rationalise resources and hesitant over whether they should support staffing the IHRC at this stage or empower the Government of Haiti and its ministries. The current team at the IHRC has been focusing heavily on better communicating its mission and activities and extending its mandate.

22.   The Interim Haiti Recovery Commission s Public Accountability Office reported in June 2011 that – although not all projects provided financial updates – less than $118 million had been reported as disbursed out of the $3.2 billion in projects it had cleared for funding. A mismatch of resources has also prevailed and been consistently denounced by the Office of the Special Envoy, as the Government of Haiti has not been directly receiving sufficient funding. As an example, at the time of the evaluation President Martelly's team was still working out of tents.

New leadership, room for optimism and opportunities

23. President Martelly's election and his "Four E's" programme of education, employment, environment and the rule of law (*Etat de droit*), have been met with enthusiasm. The administration would like to proactively engage the private sector and the diaspora in humanitarian and reconstruction efforts. The international community is keen on backing the new President and national leadership. His effort to talk with the affected population about their needs is an encouraging sign. One of the new authorities' flagship programmes is the long-term reconstruction of sixteen neighbourhoods and corresponding closure of six camps in Port-au-Prince – known as the 16/6 project. Despite some concerns with the 16/6 project, it was swiftly approved at the IHRC and many have wanted to embrace it as a model of an integrated neighbourhood approach. The project is supported as part of the Humanitarian Coordinator's proactive engagement with the new presidential team. Later on, in September 2011 in New York, the President announced his plan to create a new housing authority under the *Primature*. This move was recommended by ICG among others.[20] Beyond the challenges and expectations created, the prospect of "free education for all" by the end of the President's term is also seen as a unique opportunity to push for development goals. Mayors throughout the past year have also exercised leadership and assumed roles enabling the response in many key areas within their communes.

II.   Main Achievements, Gaps, Limits and Constraints

II.1   Main Achievements

Disaster preparedness mainstreaming

24. Preparedness was cited as a key achievement of the response. When considering the three objectives of the current revised Consolidated Appeals Process (CAP), most progress has been made on supporting targeted disaster risk-reduction interventions focused on preparing for and mitigating the impact of the 2011 rain and hurricane season. In preparation for the hurricane season, humanitarian actors have implemented activities in support of the Haitian Government, particularly the Direction de la

> The three main objectives of the response based on the current revised 2011 CAP are:
> 1. "To fill critical gaps and provide targeted, catalytic interventions which enable reintegration or recovery of affected populations and illustrate how durable solutions can be produced. "
> 2. "To ensure humanitarian interventions which provide protection and save lives among groups made highly vulnerable by exposure to multiple risks: earthquake-induced displacement, cholera outbreaks, cyclone season threats or extreme food insecurity. "
> 3. "To support targeted disaster risk reduction interventions focused on preparing for and mitigating the impact of the 2011 cyclone."

Protection Civile (DPC). A contingency plan was finalized and circulated, stocks were prepositioned by department and cluster and two simulation exercises were successfully carried out, testing coordination mechanisms in the case of an emergency. The Direction de la Protection Civile has "emerged strengthened from the current response".[21]

A largely effective response in camps

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[20]ICG, Post-quake Haiti: Security Depends on Resettlement and Development Latin America/Caribbean Briefing N°25, 28 June 2011

[21] Interviews, observation of DPC's role in meetings and in the field, OCHA IM CAP monitoring. (Clermont et al.) DEC study Urban disasters – lessons from Haiti A Study of member agencies' responses to the earthquake in Port au Prince, Haiti, January 2010 found that the DPC had emerged strengthened particularly at the departmental level." March 2011 (27)

25. The evaluation found that the response in camps and had been a considerable achievement in a challenging context.[22] A major success of the humanitarian response is that there have been no cholera outbreaks in the camps. Assistance has been provided and camps have been managed under difficult circumstances - under threat of evictions, stigmatisation of camp population, insecurity, declining assistance, and lack of durable solutions. The Camp Management Operation (CMO) units have also played a positive role in strengthening leadership at decentralised levels, both at the level of mayors and the Direction de la Protection Civile (DPC). Although there has been much discussion regarding the international community being excessively focused on the camps, less visibility has been given to the work outside camps.

Progress on rubble removal

26. Debris removal and its management became a priority for the Government of Haiti, as it was affecting progress in other areas. The earthquake created an estimated 10 million cubic meters of debris. As in the case of camp management, the colossal task of debris removal is a new need created by the earthquake. An estimated 2 million cubic meters of debris were removed in 2010 (approximately 650 000 m^3 of debris through initial Cash for Work efforts) and the target for 2011 was to manage a further 4 million cubic meters. UNDP now estimates (October 2011) that almost half of the debris has been managed.[23] This has been achieved despite decision-making, logistical and funding challenges. Strategy had been initially lacking and obstacles included obtaining permissions from Ministry of Public Works, accessing neighbourhoods, and entering heavy machinery. Project coordination among actors involved in debris removal and residents refusing to authorise demolition of their houses were also cited as difficulties affecting progress.

"Transitional shelter: T-shelter 4.0"

27. Local production and construction capacity on transitional shelter (T-shelter) has been developed, both in terms of agency capacity and through training.[24] While there is a preference for finding durable solutions, appropriate T-shelters are still an option in the medium-term given the current situation and challenges in Haiti, provided beneficiaries have access to livelihoods and services. Cluster level discussions on transitional shelter standards lasted for many months in mid-2010, due to high costs of all available designs, lack of materials and many logistical challenges. Criteria for T-shelters have included being simultaneously resistant enough to withstand Category-1 hurricane winds and last for up to 5 years, be redeployable and quick enough to mount rapidly, as well as being reusable, so that tenants can relocate. Production and construction capacity has now been created and there are many good examples of how agencies have managed to adapt to the Haitian context and the many challenges of neighbourhoods in Port-au-Prince.[25] Structures can now technically support the weight of later improved construction. Some new designs have a mezzanine and can further adapt to the lack of available space in neighbourhoods and the fact that houses before the earthquake could have two stories and

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[22] Interviews, meetings, observation. Haitians set up impromtu tent cities through the capital after the earthquake. At the end of January President Preval was appealing for 300,000 tents and initial intentions were to move 400,000 people to larger camps.

[23] Evaluators had the opportunity to discuss J/P RHO's rubble removal in Bristou and Bobin and the CARMEN project (Centres d'Appui pour le Renforcement de Maisons Endommagées)

[24] UNOPS for instance through its warehouse and production centre in Tabarre now has the capacity to produce 30 shelters a day and mount 20 of them in neighbourhoods.

[25] A very accurate account of the challenges and an example of the progress that agencies have been able to make can be viewed on IFRC site and the link http://www.youtube.com/watch?v=bsjoADopKKA

accommodate two families. Given the complexity, however, there are few agencies that have been able to implement shelter projects successfully; costs, the need for technical expertise, procurement knowledge and especially time for community participation and dialogue have been underestimated. Major constraints have included land ownership issues, rubble removal in individual plots, and lack of suitable public land for organized new temporary settlements. Mayors have exercised new roles and demonstrated leadership to overcome some of these barriers.

Other Earthquake response progress indicators highlighted in 2011 CAP Mid-year review
Shelter: 64 000 families have been relocated into transitional shelter
117 200 tents, 1 185 052 tarps and over 2.5 million NFIs were distributed to respond to emergency shelter needs In 2011 efforts focused on supporting the return of affected populations to their of origin or to relocation sites.
Agriculture: Emergency agriculture projects facilitating access to inputs benefitted 200,000 households and neighbourhoods seed multiplication efforts a further 25,100 families. Livelihoods activities targeted 48,200 households.
Education: 371 semi-permanents schools and 139 permanent schools received assistance.
700,000 school children received school material. 1,500,000 students received school food rations.
Health: 17 field hospitals were established. 345,000 medical kits were distributed between January and March 2011 by PROMESS. 900,000 doses of vaccines were administered. Surveillance established and free obstetric care provided in 63 hospitals with qualified personnel.
Nutrition: Nutritional Stabilisation Units (USN) were established in 9 departments.

Integrated Neighbourhood, "Safe Return" and Community-Based Approaches

28.   Humanitarian agencies have piloted a strategy encouraging integration of key programmes in targeted urban neighbourhoods, now recognised as the Neighbourhood Approach (NA). The Neighbourhood Approach is a comprehensive and rational approach to longer-term resettlement and to helping households and communities restructure neighbourhoods and rebuild safer houses (i.e., ultimately building back better and restarting city planning in Port-au-Prince). For IFRC it is part of its strategy to encourage integration of key programmes in urban neighbourhoods, involving the direct implementation of key services (shelter, water and sanitation, livelihoods support, community health and risk reduction).[26] UN-Habitat has been successfully advocating the "Safe Return" approach that has been implemented in the Bristou and Bobin neighbourhoods, amongst others.[27] The approach also helps overcome problems related to inter-cluster coordination, although coordination and collaboration among different agencies remains crucial.[28] The agencies interviewed reported that they had underestimated the effort of consultation and participation within this community-based approach, where processes are all-important. Humanitarian projects that have shorter implementation periods tend to focus more on results than processes.

29.   The 16/6 project follows a similar rationale but is costlier (78 million USD to resettle 30,000

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26 IFRC strategy and Operations update n°28 – Eighteen months Progress Report 2 November 2011
27 A coalition of actors have been working under this project mainly implemented by Solidarites with ECHO funding where UNHabitat has been supporting neighbourhood committees, UNOPS repairing yellow houses and mounting T-shelters in lieu of Red Houses, J/P RHO removing rubble, etc. The French Red Cross has also been implementing the approach in Delmas.
28 Interviews and DEC study.

people) and more ambitious in scope (both in terms of terms of improved city planning – as bulldozers will be involved to introduce services – and the number of neighbourhoods targeted). After the Interim Haiti Recovery Commission's approval of the 16/6 project, the Haiti Reconstruction Fund (HRF) has funded an initial tranche with 30 million USD, and the United Nations Country Team (UNCT) is supporting and co-implementing it. The experience gathered by agencies such as IOM and UNOPS in the humanitarian response will prove helpful in this regard.

Sanitation

30. Much progress has been made on water and sanitation (WASH) in terms of supporting local capacity, and as a result of the response to cholera. Direction Nationale de l'Eau Potable et de l'Assainissement (DINEPA) has undertaken the responsibility for sanitation infrastructure, which was non-existing before the earthquake. The humanitarian intervention led to the establishment in September 2011 of the first excreta treatment facility in Port-au-Prince. In 2011 DINEPA has also recognised that water and sanitation for the camp population lies under its responsibility.[29] The Water, Sanitation and Hygiene (WASH) cluster has been able to further support DINEPA's coordination capacity and its ability to advocate for funding for acute humanitarian needs and its activities.[30]

II.2   The Big Gaps: Durable Solutions, Livelihoods, Accommodation, Communication and Continued Support

31. In all interviews and focus groups carried out by evaluators, affected populations above all wanted durable solutions to their problems and to understand what was planned and what their entitlements, if any, were. Cases where humanitarian workers can actually respond to difficult questions are rare because plans are not known and communication is one-sided, with many questions raised and limited answers.[31]   Similar findings were reported in the Care/SCF joint evaluation: "Haitians encountered and other stakeholders including within the humanitarian community, increasingly feel that the humanitarian community and government are not meeting people's expectations. They feel that humanitarian activities and programs are financially unsustainable and are not helping Haitians to achieve their own goals so that they can move forward from a state of emergency." International NGOs in this context tend to be lumped as one and are increasingly questioned, also because they are often on the front line.[32] Responses that enable greater involvement of affected populations and greater capacities in the recovery phase have been limited, as they have been implemented by a fewer number of organisations and been more targeted.[33]

32. The focus group held with Haitian staff involved in the humanitarian response also underlined that organisations have not focused enough on livelihoods.[34] Organisations involved in livelihoods projects emphasize that coverage is necessarily limited due to beneficiary/cost considerations and implementation capacity, with efforts needing multi-year commitments. Durable accommodation

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29 Interviews, Project documentation.

30 As a result of phased-out donor assistance in sanitation, a funding proposal for dislodging in camps was put forward by DINEPA to the IHRC.

31 Focus groups were held in earthquake affected neighborhoods where rehabilitation has taken place, with persons evicted from the Sylvio Cator camp, with IDP populations in camps and interviews with T-shelter beneficiaries in Corail and in neighborhoods.

32 Press reviews, interviews, graffiti.

33 Interviews, cluster participation presence by group/sector, beneficiary figures and project locations based on FTS.

34 For humanitarian actors, livelihoods projects are extremely costly per beneficiary and some actors interviewed questioned whether humanitarian funding should be used on providing solutions for a few in a context like Haiti's.

solutions are also lacking in the absence of available or affordable land, as Port-au-Prince had a housing deficit for 300,000 people even before the earthquake and most earthquake-affected population were renters as opposed to housing owners.

33. In practice, Haitian public opinion believes that Internally Displaced Persons (IDPs) in camps are receiving assistance when those affected in neighbourhoods are not. At the time of the evaluation, camps visited were not receiving any material assistance and this coincides with data reported through the clusters. Organisations face funding constraints and have phased-out their assistance in camps. Populations in camps are often stigmatised.[35] IOM, ACTED and Communicating with Disaster Affected Communities (CDAC) Haiti carried out "Intentions Survey" polling over 15,000 camp dwellers to find out why they are still there despite the discomfort and insecurity posed by living in tents or under tarpaulins through a cholera epidemic and two consecutive hurricane seasons. The Intentions Survey found that 94 percent of people living in camps would leave if they had alternative accommodation. Most of those surveyed said if they had to depart immediately, they would not have the means to pay rent or the resources to repair or replace their damaged or destroyed homes. In interviews, the evaluation found that camp residents often had no other viable alternative to remaining in camps and that in any case they were not remaining in camps because of current conditions but because they had been "registered" and could hope to benefit from a durable shelter solution in the future. A major gap in this area continues to be the lack of a Government of Haiti-led resettlement policy that could guide both communication and response.

34. Based on interviews of humanitarian community representatives, the main gaps and key priorities at the time of the evaluation were in the water and sanitation and health sectors. Organisations have been scaling down water and sanitation and cholera operations and transferring these responsibilities to DINEPA and Ministère de la Santé Publique et de la Population (MSPP). Efforts to transition cholera treatment centres to MSPP lacked the capacity and funding.

Protection, DRR[36] and other cross-cutting issues

35. With capacities overstretched and the present myriad of challenges, less attention has been given to cross-cutting issues.[37] At the IA RTE workshop it was suggested that disability and ageing were not really on the agenda was because there was "no sub cluster for elderly, for people with disabilities and other vulnerable groups while there is a cluster for gender-based violence (GBV) and child protection." The lack of disaggregated data in assessments was also mentioned as an issue affecting the ability to support specific vulnerable groups. With the exception of disaster preparedness, inter-sectoral coordination has been regarded as weak and has not facilitated further take-up of either cross-cutting or multi-dimensional issues.

36. At the level of specific clusters, inclusion of cross-cutting issues is limited. This was case even in the shelter cluster which, when led by IFRC, was considered one of the best-run and most comprehensively resourced and coordinated clusters.[38] Disaster Risk reduction (DRR) and the

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[35] A working group in the RTE workshop underlined that many actors have been working where there were no camps and were working in communities prior to the earthquake. Evaluators found that more that the bulk of efforts are in fact focusing on neighborhoods but that the perception in Haiti is that too much assistance has gone to camps.

[36] The concept of DRR has different meanings among actors.

[37] Interviews, DARA 2011 Humanitarian Response Index data.

[38] The shelter Cluster Review (April 2011)found that;" Technical references on the web site include links to guidance on disability, gender and human rights manuals but cross-cutting issues feature rarely if at all in Cluster strategic documentation.

environment were also seen as not mainstreamed in the response. There are elements of disaster risk reduction that have not been considered in certain shelter projects. Only on environmental issues, through an adviser recruited via WWF, did the cluster manage to assemble a number of key resources relevant to shelter.

37.　　Protection in Haiti (camp evictions, gender based violence,[39] child protection) is viewed as increasingly critical on all fronts. The pressure in communes to forcibly close camps and evict residents is moun Direction de la Protection Civile ting. The lead agency on protection, OHCHR, is seen as very active despite its limited human resources.[40] It however faces problems related to being part of a UN integrated mission, which can undermine its advocacy efforts.[41]

II.3　　Limits and Constraints

A costly response

38.　　According to the Financial Tracking System (FTS) data, total humanitarian funding for Haiti amounted to over USD 3.5 billion in 2010 and USD 493 million in 2011.[42] The evaluation found that the response to the earthquake has been far more expensive than anticipated. On average, organisations – including donors and key UN agencies - recognised that project costs had been between 2.5 to 3 times more than what had been initially estimated.[43] There are several factors that affect the cost of operations in Haiti, including:

　　a. the cost of living in Port-au-Prince;
　　b. technical solutions are more costly in urban environments (e.g. for water and sanitation (WATSAN);
　　c. the amount of traffic that leads organisations to have to either double or triple their logistics and staffing capacity because of the time it takes to go from point A to point B;
　　d. delays in implementation which increase project running costs as structures have to be maintained;
　　e. the need for imports because of the limited amount of suppliers in Haiti and local procurement being more expensive in general;
　　f. bringing in supplies to an island;
　　g. operational dynamics often entail major agencies subcontracting others, which entails additional delays and overhead costs.

The strategic framework template, Response Plan and Cluster Position Paper name none of the issues. The Advocacy Document references participatory assessment and gender, age and HIV/AIDS status in an annexe. It refers briefly to environmental issues in the context of transitional shelter funding but nowhere to human rights. Performance standards in the Shelter Technical Guidance paper refer to age, gender and HIV/AIDS but not to participatory approaches, environment or human rights."

[39] The evaluation observed that two girls raped in a camp referred to the intended health facility returned to the camp without receiving treatment.

[40] As an example the Protection cluster through the Housing, Land and Property working group issued a proposal for redressing Renters position in the Haitian Housing Assistance as many post-disaster responses fail to incorporate the particular situation of renters in a durable manner.

[41] At the time of the evaluation, a Press statement on forced evictions was released just after the alleged abuse committed by MINUSTAH Uruguayan troops in September 2011.

[42] FTS data.

[43] Specific examples comparing costs of shelter in Pakistan and Sri Lanka were mentioned but there are no studies on this issue or references to standard unit costs to compare the response in Haiti to that of others.

Timeliness and results: striking the balance

39. Agencies found it challenging to strike the right balance between responding to targets and focusing on building capacities and transition towards recovery. The cholera epidemic strongly affected the ongoing operations, with even agencies not directly involved in water and sanitation or health dedicating their logistic and awareness raising capacity to the cholera response (for a month and a half on average). Representatives of organisations interviewed also found that decision-making within the humanitarian community took too long and, specifically, that policy documents, operating frameworks and approaches took too long to be approved.

40. A minority of agencies interviewed also found that they had unrealistically been working under assumptions of government capacity and decision-making at the national level and that this had been detrimental for the response. Government capacity had been assessed pre-earthquake at different levels and a number of studies have been carried out or updated since the disaster. Clusters have also since engaged in government capacity mapping at different levels. UNDP has a database on these with information from different actors on this issue.[44]

Multiple critical constraints

41. The context in Haiti has had agencies move in and out of an emergency mode. The cholera outbreak led organisations to divert their activities and shift the focus of the response. The vast majority of non-specialised agencies prioritised sensitisation activities.[45] Activities are also affected by the threat of hurricanes and heavy rains.

42. Political turmoil and uncertainty affected the response and placed further uncertainty on defined national priorities, policies, institutions[46] and the capacity for decision-making. Structural problems, land tenure, land availability, lack of legislation, limited government capacity and institutional weaknesses, extreme poverty[47], inequity, crime, impunity, an overburdened infrastructure system, limited resources, the environment, dependency and limited markets are all cited as major constraints.

43. The limited level of funding is also percieved as a major issue affecting both humanitarian and recovery efforts.[48] Emergency funding has dried up for many agencies. The Consolidated Appeals Process (CAP) in Haiti has not been viewed as an effective instrument for obtaining funding, partly because it is not part of a wider fundraising and communication effort. The CAP failed to provide a comprehensive overview of needs and a strategy for linking with recovery and development. Prioritization of projects continues to be an issue. The level of funding even for the reduced mid-year CAP is considered low and projects have been mainly funded through the individual efforts on the part of appealing agencies. The mid-year review of the CAP was only available in French, which is a limitation when one wants to receive

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[44] Including the Eunida Governance and Capacity Building Project which aims to reinforce the Haitian administration through technical assistance to the 11 ministries and through aid coordination. The evaluation team however was not able to access UNDP's database.

[45] An agency like UNOPS stopped all its regular project activities for a month to use its community mobilisers in the cholera prevention effort.

[46] With President Martelly favoring the establishment of a Ministry of Defense and civil protection, concerns were raised regarding the future of what is now a strengthened DPC.

[47] Over half of the population lived on less than USD $1.25 a day before the earthquake. 46% of households lived in extreme poverty (2008 World Bank data).

[48] The HRF faces important fundraising challenges.

funding from donors that are not present in Haiti or French speaking.[49]

II.4   Progress on main recommendations emerging from first phase of the RTE

44.   Utilization focused evaluations emphasize the need for evaluators to present findings, evaluators and users to agree on conclusions and recommendations, and users to draft and report on an action plan to take those recommendations forward. For Inter-Agency Real-Time Evaluations (IA RTEs) to be more useful, basic recommendations should be discussed and concrete actions defined at the Humanitarian Country Team (HCT) level. Progress on this second phase should be reviewed in advance of the Consolidated Appeals Process (CAP) mid-year workshop.

45.   To the knowledge of the evaluation team, there was no formal follow-up or management response to the first phase of the IA RTE. The workshop was attended by a broad audience and the report was widely circulated. Despite the intended focus of the first phase of the evaluation being on the initial response, recommendations pointed to issues that are critical for recovery. In this sense, many of the themes covered by the evaluation would have been relevant throughout 2010.

46.   There are two main factors that impact the situation today. First, constraints on funding now provide for a very limited response on the part of humanitarian actors. Second, there is a greater recognition of the need for more realistic expectations of what agency interventions can achieve. The evaluation found that progress was made on most of the five main recommendations: 1. adjust the response to its urban environment; 2. extend geographic coverage to rural areas; 3. make the response inclusive; 4. manage the negative side effects of aid; and 5. prepare for challenges.

Adjust the response to its urban environment

47.   At a global level, the IASC strategy "Meeting Humanitarian Challenges in Urban Areas and Two-Year Action Plan" was drafted in September 2010 to: i) improve multi-stakeholder partnerships; ii) build technical surge capacity and urban expertise; iii) develop and adapt tools to urban contexts; iv) promote the protection of vulnerable urban populations; v) strengthen livelihoods; and vi) enhance preparedness among national and local authorities in urban areas. The Disaster Emergency Committee (DEC) study on Haiti also focused on "Urban Disasters – Lessons from Haiti".[50] In Haiti the humanitarian community has made some progress in adjusting to an urban context by working through municipalities and attempting to strengthen local structures (e.g. Croix des Bouquets Task Force coordination meetings). Community and neighbourhood-based approaches have been piloted and are being supported as a model. The Water, Sanitation and Hygiene (WASH) cluster has favoured integrating services in communities using a "break down the walls approach" to water and sanitation. There are examples of longstanding NGOs in Haiti undertaking studies on livelihood approaches in urban settings, for instance. Lessons have been learned. Sphere indicators, for example, have been viewed as not appropriate in these types of settings. The difficulty of adapting to the context of Port-au-Prince can not, however, be underestimated and has been a challenge faced not only by the humanitarian community but by the development community and previous Haitian authorities.

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[49] The need to translate documents into English to improve funding was a lesson learned in the context of the Central African Republic, an underfunded emergency. The HC/RC's (Toby Lanzer) use of the CAP was considered best practice in 2007.
[50] The evaluation also coincided with an IFRC/ Haitian Red Cross Exchange Experience Regional Workshop on Urban Risk Management in the Americas in Port-au-Prince from 22 to 25 August. Teresa Camacho, Acting IDRL Coordinator for the Americas, led a workshop entitled "Reducing red tape, and strengthening accountability in disaster response".

Extend geographic coverage to rural areas

48.   Attempts to extend geographic coverage are viewed as having been too limited, with agency capacities already overstretched. People continue to migrate to Port-au-Prince in search of livelihoods and services. The cholera effort at least helped agencies to focus on other areas of the country; the Water and Sanitation (WASH) and Nutrition clusters for instance were decentralised. MINUSTAH Civil Affairs has continued to work on decentralisation and be the main presence in outside Port-au-Prince. Recommendations from assessments continue to focus on the problem of over-centralisation and, for example, United Nations Country Team (UNCT) agencies deploying of personnel outside Port-au-Prince.[51] Recognising that the earthquake-displaced are mostly no longer in rural areas, the current concern is that vulnerability indicators may be worse in areas not affected by the earthquake and that the response further exacerbates this imbalance over time.

Make the response inclusive

49.   The evaluation found that much progress had been made in recruiting French-speaking staff and that the coordination meetings and key documents are now in French. Many UN agencies have moved and meetings are increasingly organised outside MINUSTAH's base. Most clusters are, however, still seen as a forum for expatriates and Haitians do not feel that they are included enough in decision-making. Not enough Haitians are placed in key positions or seconded as staff in ministries. With the benefit of hindsight it would appear now that recommending that meetings or staff speak either French or Creole was not sufficient and that the need for Creole to communicate and make the response truly inclusive was underestimated. OCHA's potential role in engaging with local organisations and coordinating with local entities is frequently raised.[52]

Manage negative side effects of aid

50.   As in the case of adjusting to the environment of Port-au-Prince, managing the negative side effects of aid proves all the more challenging in a context like Haiti's, where NGOs were known to play a prominent role before the earthquake. A number of implementing agencies emphasized that product availability in Haiti is limited and local production and businesses were heavily affected by the earthquake. There is concern that local procurement only benefits the wealthy and further exacerbates inequalities. With prices soaring, resorting to imports both reduces the cost of operations and can help curb price inflation and widening disparities. This second phase of the evaluation was unable to determine whether certain practices such as covering Government of Haiti staff costs or stipends to volunteers would have ultimately positive or negative consequences.[53]

Prepare for challenges

51.   As mentioned previously, most progress has been made on disaster preparedness - both geographically and per sector - through contingency planning, capacity strengthening and awareness

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[51] Cf. ECOSOC July 2011 Report.

[52] In interviews, RTE workshop working groups and OCHA RTE 2010. Organisations like UNICEF who face less funding constraints. and are prioritising longer-term approaches have managed to expand their coverage in nutrition.

[53] Examples of both were given. To decentralise the services of one governmental agency allowance for travel were being paid by one UN agency. This approach eventually led to the governmental agency supposedly no longer wanting to cover needs in Port-au-Prince and only work outside. There was also some lack of clarity on what was being paid and at what levels.

raising. The Disaster Emergency Committee study found that disaster preparedness is often the most clearly understood of all Disaster Risk Reduction (DRR) priorities.[54] Disaster preparedness and national capacity strengthening have improved over time, supported by programmes implemented by UNDP and OCHA among others.

III.   Coherence, Connectedness[55] and Sustainability of the Response

III.1   Lack of clarity and consensus on what constitutes humanitarian action in Haiti

52.   The mandate, goals and objectives of the humanitarian response are difficult to establish in the context of Haiti. There is an increasing pressure to reduce humanitarian aid in spite of the reality of the situation (e.g. indicators on the ground and government capacity to take over key services). Humanitarian intervention and its phases are not always well understood by Haitian stakeholders (authorities and public). Those interviewed had differing views on what the role of the humanitarian response was.[56] For some humanitarian response should not be expected to address Haiti's structural problems, while others underline that there was humanitarian action in Haiti prior to the earthquake and the objective should be to follow "build back better" approaches. The Humanitarian Coordinator/Resident Coordinator (HC/RC) has underlined how intertwined emergency response and development needs are and how difficult it is to attempt to separate the two.

53.   The lack of definition was also revealed by the general discussions and questions raised in the Consolidated Appeals Process (CAP) 2012 workshop, where there were mentions of the existence and need for both "borders" and "bridges" between the humanitarian response and recovery efforts and how far humanitarian actors should go in working on recovery, transition[57] and capacity building[58]. As Consolidated Appeals Process has not led to an action framework with clear links established with recovery and development efforts, collaborative approached for more seamless transitions are warranted.[59] There is some confusion regarding the timing of transition, when actors should start focusing on it, and specifically how the pace of recovery and reconstruction affects transition. On the funding front, the dilemma was depicted as one in which development donors were still defining camps as camps which for humanitarian donors were now slums. Overall, beyond the need for defining thresholds, there has been limited consultation or space for discussion between humanitarian and development actors regarding joint assessment and planning on who supports given priorities with

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[54] See DEC study March 2011.

[55] **Connectedness** refers t**o** the need to ensure that activities of a short-term emergency nature are carried out in a context that takes longer-term and interconnected problems into account.

[56] Evaluators during the RTE were also asked whether we felt it was the role of humanitarian actors to ensure that those resettled in Corail outside Port-au-Prince had access to livelihoods.

[57] As in the case of defining the limits of humanitarian action, actors interpret the term "**transition**" and what it encompasses differently. It is however widely equated with a situation that is generally improving**.** 'Transition' refers to the period between the immediate aftermath of crisis and the restoration of pre-crisis conditions (recovery), or their improvement to a satisfactory level (development).[57] Transitions are also understood as periods "when intensified efforts of capacity building are needed and where partnerships of the international community are most crucial for supporting efforts to overcome adverse situations, and create conditions for stability, human security, governance and protection of human rights."[57]

[58] (OECD) can be defined as a process whereby people, organisations and the international humanitarian community as a whole unleash, strengthen, create and maintain capacity to identify and meet humanitarian needs in a timely, efficient and effective manner. This involves the individual, organisational and systemic level.

[59] Initial 2011 CAP was for over 900 million USD and included creating durable conditions for return and capacity building as two of its four objectives. The revised 2011 CAP sought to adapt to the funding scenario and revised the objectives down to three that are far less ambitious: To support catalyst interventions to allow return, relocation and reintegration in order to progressively close camps 2. To maintain essential services in Camps where return or relocation solutions have not been identified or are still in progress. 3. To prepare a contingency plan and respond in case of natural disaster.

what. The connection between the Consolidated Appeals Process and the UN's Integrated Strategic Framework (ISF) has also been limited[60]

III.2   Uncertain planning

54.   Representatives of agencies and authorities underlined in interviews that the plans and the objectives of the Haitian Government are not well known. As a result, actors do not always have enough information to align with government-led strategies; this also affects strengthening institutional capacities.[61] The Integrated Strategic Framework (ISF) is based on the Government of Haiti's March Action Plan for Reconstruction and National Development of Haiti. Development of the Government of Haiti's Action Plan and the Interim Haiti Recovery Commission's December 2010 Strategy involved some of the same experts. Limited Haitian involvement in both efforts and the President's platform for change has led to some doubts on the current validity of these documents for priority and target setting. Indeed, the July 2011 ECOSOC emphasized the need for increasingly focusing "international support on priority sectors identified by the authorities in power, including the "four Es" that President Martelly has identified as major components of the recovery programme, namely education, employment, environment and the rule of law (*Etat de droit*)."

III.3   Trying interrelationships

55.   The international humanitarian response is recognised for its achievements in what is regarded as the relief phase and for trying to engage with the highest leadership positions in the Government of Haiti. Senior Government of Haiti officials have found it difficult to deal with what they felt were so many organisations and people on specific issues like resettlement.[62] The issue of weak government oversight and low accountability of international aid efforts was brought up by internationals and Haitians alike. Haitians have also often felt marginalised by aid agencies.[63] The prevailing current view in Haiti is that there is a lack of understanding of how the country works and that aid professionals try to replicate programmes from elsewhere instead of adapting to the specific Haitian environment.[64]

56.   Any capacity-building approach goes hand in hand with engagement. At the time of the evaluation, most expatriates interviewed – an estimated 80 percent – had been in the country for over a year. The awareness of the need for engagement with and understanding the strategies of authorities, civil society and affected populations was high. Those interviewed also underlined the need for understanding and framing engagement in the context of a fragile state, with required guidance and a differentiated approach.

57.   Aid agencies were working primarily with local authorities at the time of the evaluation. Engagement at other levels and within ministries was more difficult given the prolonged context of outgoing ministers and uncertainty with respect to the plans of a prospective government. At the

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[60] Ultimately, certain CAP projects can be supported by development donors (e.g. the EU in the case of WFP school feeding) and projects in the IHRC can be funded by humanitarian donors (e.g. UNDP's DRR project by ECHO).

[61] Interviews, RTE workshop working group.

[62] Interviews.

[63] Interviews, focus groups with Haitians, document review.

[64] Haitians are increasingly frustrated with the presence of internationals and their approaches and looking for other models. One person working for the IHRC commented: " I work throughout the world on anti-corruption and here [in Haiti] I spend all my time in meetings excusing myself for not being Haitian."

neighbourhood level, organisations were discussing interventions with neighbourhood committees and establishing complaints mechanisms (e.g. call centres). How representative the committees actually are, being un-elected, was an issue for some agencies, while others found that successful engagement requires not questioning or altering structures from the start.

58.   Humanitarian actors recognise the beneficiary involvement as the weakest area of the response.[65]. Affected populations interviewed – the youth in particular – were increasingly feeling disenfranchised, also citing that committees were composed by "old men".[66] Young people sensed that since the earthquake the rift between the elderly and youth and the wealthy and poor had widened. National NGOs and Community Based Organizations have often felt bypassed and only used for information gathering purposes. Despite the fact that many agencies are longstanding in Haiti, their engagement with authorities, Haitian civil society and the Haitian private sector was considered weak.[67] Haitians found it especially difficult to interact with organisations that are in MINUSTAH's logbase because of how complicated it is to access. OCHA's potential role in facilitating connections and engagement – specifically with National NGOs and between the NGO community and the Government of Haiti at a higher level was brought up in several interviews and at the RTE workshop.

III.4   Sustainability of efforts

59.   Sustainability was described as the "Achilles' heel" of the humanitarian response. The issues of exit strategy and what a scenario of success would look like were frequently raised in interviews. Again, the problem in many instances was seeing who could take over, and many referred to the country's chronic dependency for services before the earthquake (in Haiti, the reality is that most services have been delivered privately, by companies and NGOs). Most actors were currently decreasing their assistance, often with a planned handover strategy that was not proving sufficiently effective. At the time of the evaluation, the problematic phasing out or hand-over of water and sanitation activities and cholera treatment centres were clear examples of the lack of sustainability of efforts and the fragility of transition plans. Absence of funding and time were mostly guiding the decision to transfer projects. Sustainability of services was again linked to capacity building efforts and for many the continuance of staff.

60.   From a humanitarian perspective, two main gaps were consistently being brought up as critical concerns: water and sanitation (more specifically, sanitation in camps) and the running of cholera treatment centres. Access to water, sanitation and hygiene (WASH) services has increasingly deteriorated in camps. There are differing views on the need for discontinuing free water trucking in this context.[68] A year after the cholera outbreak began, according to MSF, resources for adequately preventing the disease "remain rudimentary and at the mercy of the uncertainties of life in the country".

III.5   Limited take-up of humanitarian concerns in longer-term recovery efforts

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[65] DARA Humanitarian Response Index data for Haiti in 2011.

[66] 40 % of Haitians are under 15.

[67] See An Independent Joint Evaluation of the Haiti Earthquake Humanitarian Response that found that "connections to and relationships with the wider Haitian society, government and private sector seemed to be seriously lacking".

[68] It was denounced by MSF but praised by others who found that free services were affecting private providers and creating an imbalance. Organisations like the Red Cross have been transferring trucking capacity to DINEPA –the Haitian water Department – and supporting them for an additional time period with funding and training. The cluster transition strategy includes supporting the building of new neighbourhood water kiosks in areas which are not connected to piped water supply, with kiosks being managed and supervised by community members.

61. Transitioning from relief and phasing out humanitarian response has also been difficult in a context where humanitarian priorities are not sufficiently taken up by other actors. The main concern is that the most vulnerable will not be covered in the recovery and reconstruction plans. The humanitarian community considers that advocacy has been generally weak. There has also been lack of clarity on an overall strategy and plan for transition. There is limited interaction between development donors (the G-12) and the Humanitarian Country Team for planning purposes or around specific issues. Many development donors have pre-established relationships and sectors of intervention from before the earthquake and less flexibility to take on new needs or increase their support.[69] The Interim Haiti Recovery Commission has on several occasions mentioned that by mandate they don't cover humanitarian aid projects, while humanitarian donors were in fact encouraging all organisations to submit their projects to the IHRC. The limited take-up of humanitarian concerns is both a product of the way projects have been submitted to the Interim Haiti Recovery Commission and its architecture and the limited funding available for recovery.[70]

III.6   Piloting and linking efforts

62. The humanitarian response has helped pilot approaches and interventions that could be continued and replicated on a larger scale by development actors. Examples of this are visible in all sectors. One good example is the aforementioned neighbourhood approach and capacity developed to better understand and implement the 16/6 Project. Other humanitarian projects have purposefully integrated what were considered development features so that they are more relevant for longer-term actors willing to take them over (e.g. sanitation excreta disposal facility).

IV.   Coordination and Cluster Transition

IV.1   Limited connection between different coordination mechanisms and actors

63. An overall aid coordination framework integrating all phases of assistance has been lacking. There are limited connections between coordination mechanisms and some overlap.[71] The Strategic Plan for the Remainder of the Interim Haiti Recovery Commission's Mandate (December 2010) recognised that coordination was a major challenge for both humanitarian and development efforts. It further identified that lack of coordination was often a result of lack of leadership, or lack of recognized leadership and called on all concerned ministries or Haitian entities to be involved in all stages of all major humanitarian or development efforts. The need for moving away from "a multitude of silo coordinating mechanisms that have only superficial links with each other and the governmental ones" is underlined. In addition the strategy emphasized that the government in the short term should lead the existing mechanisms (humanitarian clusters and sector tables).

64. There has also been limited interaction between the Interim Haiti Recovery Commission and the Humanitarian Country Team or OCHA. The humanitarian community was not integrated enough into the process of establishing or supporting IHRC and has been somewhat isolated.[72] Several NGOs felt that the

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[69] In interviews, only the World Bank found that they had more than sufficient funding.

[70] DINEPA, with the support of the WASH cluster it co-leads, submitted a project to the IHRC to cover desludging. Desludging activities conducted by UNOPS with DINEPA trucks stopped on 31 August due to a lack of funding. Project approval takes time and once cleared there is limited funding available for recovery to cover needs.

[71] See figures and tables on coordination in Annex.

[72] Interviews. Document review of draft coordination frameworks.

preparing proposal for IHRC was too time-consuming and that they had to prioritise proposals for those channels where they were more likely to receive funding.

65.   The problem with focusing coordination on sectors is that both inter-ministerial and inter-cluster coordination are regarded as weak. This has constrained efforts to work on multi-dimensional and cross-cutting issues and address humanitarian transition challenges in a more concerted way. Recent proposals reflect the need to move away from a sector-based approach. An important example is the Humanitarian Coordinator's action in response to the problem of evictions that proposes setting up "a platform that links relevant ministries, local authorities, the Haitian National Police, the private sector and the humanitarian community … [to] allow for effective planning for progressive camp closures, while identifying alternative housing solutions in both urban and rural settings".[73]

66.   The cluster system and the Interim Haiti Recovery Commission both suffer from the difficult to rectify initial lack of inclusiveness of Haitian actors.[74] Despite efforts, the clusters suffer from stigmatization as a mechanism that has limited Haitian ownership. [75] Involvement of Haitian NGOs has been largely unsuccessful.[76] The IHRC also faces capacity issues and has had limited relations with humanitarian actors and the clusters. These factors in addition to its limited mandate have not favoured a process where clusters could merge with, phase-out or hand-over some of its functions to the Commission and its priority areas.

67.   In the case of MINUSTAH, there is stronger interaction outside Port-au-Prince and recognition of the important role that civil affairs officers have traditionally played on decentralisation and at the departmental level. UN agencies also welcome receiving further political analysis and guidance from MINUSTAH. MINUSTAH feels actors increasingly approach it because they have fewer resources.[77]

68.   The main objectives of an overarching transition plan under a Haitian-led vision have yet to be defined. In terms of understanding the components of and planning transition, the evaluation found that few actors that had left and phased-out their activity in Haiti were able to develop more comprehensive transition plans that would consider elements of the following:

- Purpose and objectives
- Strategies
- Guidelines
- Processes
- Key components
- Schedules
- Key indicators

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[73] ReliefWeb report — *http://reliefweb.int/node/446209*, The humanitarian community in Haiti concerned about the increasing number of evictions in camps, Statement attributable to the Humanitarian Coordinator in Haiti, Port-au-Prince/09 September 2011.

[74] Key to transition is the role of the government and the emphasis on "partnerships" with local actors. Capacity issues, the top-down cluster roll-out dynamic and the nature of cluster meetings often position the UN as the "lead" in humanitarian response.

[75] The focus group held on 30 August 2011 with Haitian National staff working in the aid effort signaled national capacity building as one of the major weaknesses of the humanitarian response. In the transition phase, national staff expected to play a stranger role but have seen that key positions are still held by expatriates.

[76] See Hedlund, Kerren, Strength in Numbers: A Review of NGO Coordination (ICVA case study in Haiti 2010), provides an account of the problems faced with local NGO involvement.

[77] Interviews.

- Major outputs
- Resource requirements
- Funding
- Budgets
- Staff requirement

69. Interviews showed that the lack of prospects for receiving funding for transition acts as a disincentive for organisations to prepare comprehensive plans and for these to inform overall processes.

IV.2 Cluster transition

70. There has been much recent progress with additional direction from OCHA and a presentation at an ad hoc HCT meeting in September 2011, where a deadline was defined for establishing a tentative plan on cluster transition. Evaluators did not find, however, that the objectives of overall cluster transition and a concerted strategy had been defined. This may prove helpful when considering the suitability of options, defining priorities and selecting approaches (overall and for specific sectors). The detailed Note on Cluster Transition is presented in Annex 4 of this report.

71. The evaluation found that coordination at the local level could be hampered by a compartmentalised cluster approach. With the benefit of hindsight and examples from other crises, it appears that focusing on ministries and sectorial tables is a too limited approach. Decentralised coordination and intermediate options can also prove effective. The role of the Camp Management Operations (CMOs) and the Direction de la Protection Civile in support of mayors in municipalities like Croix des Bouquets is extremely positive.

72. The transfer of humanitarian coordination activities to national authorities and development actors requires assessing services against ongoing and expected coordination needs various actors, as well as thir capacities. The number of partners in certain key areas like camp coordination and camp management (CCCM) has rapidly declined despite ongoing needs,[78] which creates a different set of challenges and a need for further rationalisation of coordination structures. Clusters have to deal with the departure of actors and phasing out of assistance (e.g. water and sanitation (WATSAN) and camp coordination).

V. Information

V.1 Cluster-driven information systems

73. The main informational challenge is having an overall assessment of needs that can better guide the response, prioritisation and appeals.[79] There has not been sufficient interest in OCHA-driven needs assessment tools for them to be used in Haiti. In October 2010, the Humanitarian Country Team, with the support of Cluster Leads, developed and agreed on a common strategic monitoring plan for 2011. It was not until April 2011 that OCHA was able to introduce a Consolidated Appeals Process (CAP) Monitoring tool, which then had to be refined. The first quarterly monitoring report was issued in June 2011, coinciding with the CAP mid-year review.

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[78] 550 560 persons remained in camps in September 2011 as per the Displacement Tracking Matrix.
[79] The revised CAP 2011 no longer provided a figure for IDPs. It was reported as being 1.3 million in initial 2011 CAP.

74. Consolidation of indicators and corroboration of data remains a challenge. A monitoring system has been recently established for clusters to report progress against key indicators every three months. The system is functioning but information gathered has to be credible and better collated.[80] It is based exclusively on data emanating separately from each of the clusters, each cluster with its own methods. Actors need to be encouraged to provide credible information, continue tracking needs based on disaggregated data, and understand the benefits of providing an overall picture of needs. At present the prevalent view is that the process is too time-consuming and that the capacity for providing the information isn't always there. Those reporting information are still to understand how this can be useful in advancing their efforts.

75. The problem for clusters in reporting against the CAP is that the instrument has not been given sufficient relevance and that it is not necessarily seen as a useful tool for advocacy and fundraising. Timeliness of reporting is also challenging, mainly with respect to partners completing their activity matrix. This was seen as a greater potential problem because of limited NGO co-lead presence (i.e. only SCF as co-lead with UNICEF for the Education Cluster). External actors mentioned the need for widening the sources, if only for cross-validation purposes. The issue of information and communication being too strictly tied to data eminating exclusively from the clusters and the UN was mentioned in interviews. Moreover, results are not validated with the population and joint assessments across sectors are limited.

V.2   Engaging with other actors on information management

76. The system needs to further adapt to the need for stronger geographically based local and departmental information sharing and two-way communication. In terms of engaging with other actors on information management, there is still no articulation between the processes of reporting against the Cosolidated Appeals Process (CAP) and the Integrated Strategic Framework (ISF) or the IHRC. Without further integration, the systems in place are not broad enough to comprehensively report and evaluate the efficiency and effectiveness of the overall response. Authorities in technical ministries feel that no entity is collecting or centralizing information. OCHA wishes to improve its relations with state actors and support them, but is only now seeking to engage more effectively with them on information.[81]

V.3   Communication efforts

77. The need for improving communication both with affected populations and donors was raised by the first phase of the RTE. Communication was not directly addressed in the evaluation questions as a sub-theme but came up consistently as a key area and in relation to all other evaluation issues.[82]

78. Communication has been extremely challenging in Haiti, in the necessary use of three languages. Two-way communication was found to be lacking. There has been a general lack of communication with the affected population – and despite individual project or sector or geographic efforts to improve accountability, there are no effective channels for people to voice their needs, suggestions and complaints. Ministries are consulted but there is no feedback to authorities once they have given their

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[80] The fact that an OCHA staff member was at the initial phase of the response gathering assessments and trying to cross validate information was highlighted as good practice in three interviews. The effort was discontinued when the person left.

[81] OCHA reported having meetings with the IHSI (l'Institut de Statistique et d'Informatique), the MPCE (Ministry of Planning and External Cooperation), the MoH with WHO, the CNGS and the DPC on strengthening national capacities for information management. They plan to appeal to UNDP for equipment, data base training etc.

[82] To further address communication issues, a working group focused on the theme during the RTE workshop and provided the detailed recommendations that have been included as an Annex.

views. Authorities and national NGOs alike feel that there is no room for either genuine partnership or real participation.

79. Projects have used communication tools, and there are examples of good practice, but these have overall lacked the necessary traction to make a difference. Implementation timeframes and prioritisation of certain results over processes are not conducive to enhanced communication efforts. New communication efforts have been piloted in the Haitian response. The Coordination with Disaster Affected Communities (CDAC) initiative, made at the inter-cluster level to strengthen communication efforts, also lacked funding.

80. Communication efforts are still considered to be bureaucratic or traditional, driven by fundraising objectives, and not adapted to the communication needs of affected populations. A particular problem area is that presentations to the media focus on the overall figure of funding provided, which gives a distorted view of what will actually reach the population.

81. With investments requiring further rationalisation, protection efforts in particular are viewed as a priority issue for the country, requiring comprehensive advocacy and communication strategies.

82. Moving forward, there is a greater need for clear definitions and consistency in terminology.[83]

VI. Summary of Findings and Lessons Learned

Primary Challenges

83. In addition to existing contextual constraints, the humanitarian community in Haiti has been facing three main challenges:

1. There are remaining acute humanitarian needs on the ground and limited resources. Operations are scaling down without there necessarily being solutions.
2. Haitians expect durable solutions; assistance not favouring durable solutions no longer meets their expectations. Humanitarian goals are not always understood and the humanitarian community's methods and instruments (i.e. forms of assistance, Humanitarian Country Team as a decision-making body, Consolidated Appeals Process) are repeatedly questioned.
3. The aid coordination and delivery system has not been sufficiently rationalised or adapted to the fast changing reality on the ground and the need for further interaction with other actors (e.g. development donors, Government of Haiti).

84. Transition is on the agenda but needs a vision, a strategy and a plan. The major lessons and tenets of early recovery and transition towards development are, in practice, difficult to implement and prioritise. There is a need for clarifying and understanding roles and responsibilities for transition to development, which are further blurred by mismatch in the level of resources across actors (humanitarian, developmental, and government).

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[83] For example, is a household displaced when it remains in its neighbourhood or even damaged house? Similarly, are people in camps displaced?

85.   Efforts are still compartmentalized and connections between the humanitarian community and development actors are limited. Effective joint planning and response needs to be guided by a consideration of national priorities and leadership is necessary to bring all actors around the table. Current approaches have favoured a proliferation of individuals with multiple roles.

86.   Sectoral and local differences discourage the use of blanket approaches; there are many levels of transition in Haiti's context.

A costly response

87.   The response in Haiti has been more expensive than in other crises and has far exceeded initial estimates. Structures of the main agencies are considered costly and not flexible enough and agencies still feel overstretched in their current capacities. Delays have consequences for costs.

Limited communication and asymmetric perceptions

88.   There are significant differences of opinion regarding the level of effectiveness of the humanitarian response in Haiti. Haitians – though not exclusively – tend to be far more critical of the response at this stage, while recognising the importance of initial efforts. Representatives of international agencies tend to value the work and progress that has been made and believe that the initial weaknesses in the response have had a negative impact on the speed and sustainability of recovery. Engaging in genuine two-way communication and supporting Haitians effectively has been a serious limitation. The humanitarian community has also been limited in its communication, by not having enough clarity on Government of Haiti recovery plans. Another misconception is that donors not present in Haiti believe the response to be well funded. There is limited recognition of how costly the response has been compared to other crises and to initial estimates.

Progress on evaluation recommendations

89.   There is a genuine awareness of the weaknesses raised in previous evaluations. Although many of the shortcomings still apply, progress has been made on many of the issues raised, and there is not enough recognition of the changes that have taken place (e.g. practically no assistance in camps). There are not enough examples of follow-ups to evaluations, such as developing an operational plan based on recommendations and assessing progress four to five months later. The cluster coordination framework also limits the system's ability to effectively take on key issues raised in systemic and agency based evaluations.

90.   It is open to discussion how late is too late to change or implement certain improvements. Some of the recommendations raised in the IASC 6-Month After Review could still apply. The humanitarian community still struggles with what should be taken up at this stage, what should have been done earlier and what is still worth doing given the timing and the resources available. Acting on recommendations from previous evaluations often requires leadership and time, both precious commodities in the humanitarian sector.

Rational coordination

91.   Coordination and planning mechanisms are not fully adapted to the current context. Coordination can be tailored to achieving results and responding to agreed objectives. For the

humanitarian community, effective coordination is driven around the outcomes for Haitians in need of humanitarian aid and early recovery. The overall coordination framework in Haiti should be adapted to meeting this goal. This involves strengthening local integrated coordination and creating a framework for effective overall coordination, which breaks down the current isolation of the humanitarian community and its efforts.

92.   Time and effort are what is most required for effectively engaging with other actors and strengthening capacities. Emergency response timeframes and top-down sector standards are not conducive enough to extended consultation and fostering participation. The Consolidated Appeals Process as a strategic exercise was well facilitated in 2011 but reproduced the same structure of the clusters to achieve results. In general, the lesson from Haiti for the humanitarian system is that unless the response is clusterised or sufficient capacity is consistently dedicated to the issue, it is not adequately prioritised.

An incomplete assessment

93.   Information is lacking on the level of needs, coverage and record of earthquake-affected populations. A problem area has been the lack of continued capacity for assessing and cross-validating information. Progress against the objectives and targets of the CAP is now monitored and reported by the individual clusters. The system needs additional buy-in and to be further expanded and connected to meet the needs of other stakeholders and also to address progress on transition (i.e. achieving durable recovery solutions).

Leadership and new opportunities

94.   Vision, leadership and decision-making have been lacking in the past in Haiti. Martelly's commitments in education and the 16/6 Project are both challenges and opportunities for positive change. There is an opportunity for real engagement and a capacity for collective work. Staff turnover is no longer and issue; the HC/RC and the top positions in the humanitarian agencies have committed to Haiti.

VII.   Conclusion

With the focus on the transition towards recovery and a new leadership in Haiti there are opportunities for focusing on and supporting change. Taking advantage of the opportunities requires increased engagement with the new government and Haitian society, alignment and flexibility. In the immediate future, attention should be given to clarifying the new government's priorities, objectives and strategies to better adapt support. A key goal should be to convey the need for formulating an overall resettlement strategy and a plan that can be supported over time and help align efforts.

There is an opportunity for starting anew and reversing the negative stigma that clusters, tables and IHRC have had in the past. OCHA and UNDP can play a role in this respect. It is recommended that OCHA encourage two-way communication with affected populations, further engage with national NGOs and help discuss concerns and common NGO positions with the Government of Haiti. Principle-driven professional international NGOs with the Comite de Coordination des ONGs (CCO) should see how they can present a common stance and approach that defends their work and shields them from increased criticism (i.e. a form of certification or adherence to certain practices that they already follow and that responds to certain oversight and transparency concerns that the Government of Haiti has). The Humanitarian Coordinator and OCHA should support NGO partners in this process.

A concerted effort should be made to connect humanitarian action with other phases or "categories" and stakeholders in the framework of an overall response. Recognising, in the words of the Humanitarian Coordinator, "that emergency response and development needs are intertwined", there is even less of a rationale for compartmentalised coordination that is much less effective at this stage. The Humanitarian Country Team (HCT) should in early 2012 further review its decision-making capacity and define its aspirations and targets for 2012 in terms of how it can engage with the Government of Haiti, development actors and Haitian civil society. It should also consider how Government of Haiti could be best engaged on humanitarian issues and in HCT discussions. Responsibilities should be assigned to different actors represented at the HCT by theme. Milestones for the transition towards recovery and for further engagement with other actors and structures can be identified and progress followed to adapt the strategy and approaches as necessary. This will require further commitment on the part of actors participating in the HCT who can step up to the responsibility and assume a role.

Transition and recovery should together be a topic that is systematically an agenda item at the HCT and in humanitarian donor coordination meetings. Similarly, humanitarian concerns should be a point of discussion in G-12 meetings. Should the IHRC's mandate be extended, their representation at the HCT should be encouraged. Humanitarian concerns should be integrated as a focus area within the Commission (in a similar way to Disaster Risk Reduction. OCHA's presence at the IHRC should also be encouraged as additional means of ensuring that humanitarian concerns be considered and progressively dealt with in a durable way. The HCT should recommend and try to ensure that there is a new strategic multi-stakeholder exercise and planning process to develop a detailed plan for transition to recovery and development that takes place involving representation from the humanitarian community. Such an exercise will help rationalise available resources and avoid that funding has to be channelled towards activities that do not offer durable solutions or are less sustainable.

There is a real opportunity to rationalise the current cluster system based on objectives, "outcomes coordination" or a coordinating results framework. The humanitarian community is taking a proactive approach to transitioning humanitarian aid coordination. This can make way for both more comprehensive sector-wide approaches and stronger geographically based decentralised coordination. The process should be jointly driven by OCHA and UNDP. It is important that dates for cluster transition be set. Considering the need for guidance and that capacities in the field are overstretched, additional support on cluster transition and coordination on resettlement (around key dates, outputs and milestones) should be sought and provided by the IASC at the global level, OCHA HQ, UNDP/BCPR.

A cluster transition plan should include intermediate solutions if these are more forthcoming and transitioning can be done at different speeds. The assessment for the rationalization and transitioning of clusters plan can be done through a fourfold process:

- A bottom-up approach to understand the array of geographically based coordination needs at a decentralised level, at all scales, from neighbourhood, to communal section, communal, departmental to national. UNDP has a role to play in supporting local governance and a stronger long-term coordination architecture.
- A review of future scenarios, understanding plans and priorities of the Government of Haiti under the new presidency, such as new institutions like as the Housing Authority. Also to understand the implications for coordination and the work carried out by clusters to date.
- A sector by sector analysis for a sector-wide approach in support of a more coherent, seamless response addressing in parallel the humanitarian issues and recovery and development, as well

as strengthening preparedness, decentralization and other cross-cutting issues. This includes supporting stronger sector groups through Government and National organizations, reviewing plans, expectations and longer-term donor agency priorities, international agencies seconding personnel and placing national Haitian staff in key positions.

- Specific concerted action for key cross-cutting and multi-dimensional issues that tackle important priorities that are fundamental to address humanitarian needs, phase-out assistance (e.g. resettlement and livelihoods) and make way for a coherent framework for coordination. Determining whether these multi-sectorial issues should act as umbrellas for sectors in the recovery phase under a new revamped and improved mechanism (i.e. if the IHRC can be reformed –as often are other national frameworks for recovery coordination - or its mandate as such is not renewed)

Attention should be given to developing key guidelines and principles and clarifying expectations and approaches for partnership on coordination. Information gathering and dissemination tools need to adapt to the needs of geographically based coordination. A productive partnership between local authorities and international actors rests on the latter recognising the government's ownership of the recovery process. UN agencies and international NGOs must find practical ways of prioritising the strengthening of local government capacity, such as seconding national and international staff to local institutions, hands-on training, and sharing resources. A key challenge to be met is that the system should empower stakeholders. Information gathering and dissemination tools need to be further harmonized, strengthened and made more accessible. There may be a need to better understand the appropriateness of tools for national and local counterparts and incorporate notions of longer-term sustainability.

Current funding constraints and gaps for both humanitarian action and adequate transition to recovery should be reassessed and quantified. A fundraising strategy to cover these needs should be defined. As donor countries have understood that the Government of Haiti wants to phase out humanitarian assistance, renewed efforts need to be placed on raising funds and communicating that the lack of funding will threaten hard-won gains. The CAP should be better used to further this purpose. It should be available in English as well as French, and efforts to reach out to donors at HQ levels should be doubled (including the use of road shows). International NGOs in their countries also have a role to play to raise awareness on the continued need for funding in Haiti. Donors across the spectrum need to further coordinate and adapt their funding to cover needs for humanitarian transition to recovery.

As costs have become a major issue in Haiti, cost and efficiency considerations should be factored in across the response. Project implementation mechanisms in recovery should be reconsidered to favour less overheads, reduced subcontracting, and more limited lagtime for procurement and implementation. Given the cost of human resources, attention should be paid to prioritising the use of time and more efficient investments and processes (e.g. in meetings, in processing documents). Human resource policies and practices specifically for UN agencies should be revised and better adapted to the needs of the response.

Given Haiti's underlying vulnerabilities, significant efforts in DRR should be maintained over time. Actors in Haiti have recommended distinguishing between longer-term disaster risk reduction and short-term preparedness and response when considering transition. Additional guidance on transition and retaining capacities should be provided specifically for contexts like Haiti's, where disasters are reoccurring. Space for focusing on key humanitarian needs should be retained in a transitioned framework through a more connected OCHA (e.g. with increased presence in the recovery and development coordination efforts)

and through additional capacity at the level of the HC/RC office. In addition, more resources and capacity should be devoted to protection issues at this key juncture and increasingly for resettlement. Global level guidance on the multi-sectorial challenge of resettlement in Haiti should still be sought. Cluster lead-agencies should attempt to embed cluster coordination capacity in their programme to support their counterparts and be in a position to reactivate the cluster if needed. Recommendations also focus on reforming human resource practices and making better use of existing rosters, allowing temporary redeployment, the consideration of additional capacity of partners, and placing Haitian staff in key roles. In addition, while the focus has been on the role of Cluster Coordinators, the experience of Haiti shows that there is a need for deploying with a range of different functions and skills.

VIII. Key Recommendations

The table below summarises key recommendations and related findings.

Related findings and conclusions	Recommendations
The international community is keen on backing the new Haitian leadership and its commitments. (§23)	**R1. Further engage with the new government and Haitian society to clarify and understand new priorities, objectives and strategies and better adapt response and collective action.**
Plans and objectives of the Government of Haiti are not always well known. (§54)	• The humanitarian community, in coordination with development actors, needs to reengage with the new government and Haitian society and take advantage of institutional changes –such as the New Housing Authority - to adapt its approach, better communicate its concerns and jointly define an action plan that addresses humanitarian priorities and provides clarity for transition. This includes reaching out to, and involving the diaspora and the private sector (e.g. learning from initiatives like Soul of Haiti, liaising with members of the Presidential advisory council).
There is a need to further align response to objectives of new government. (§54)	
Top positions in the Government of Haiti have found it difficult to engage with the humanitarian community. (§55)	
Engagement for the humanitarian community with government ministries has proven difficult without a new government in place. (§56)	• In the immediate term, the HCT in coordination with the UNCT, should task a small "lead" group (4-5) of relevant key leaders in the response to approach new Haitian government and work with it at the highest level and clarify priorities and concerns. The group should if possible have Red Cross participation and include OCHA, UNDP and UNICEF leadership.
Haitian authorities have felt marginalised by the humanitarian response (§55)	
The priority for transitioning beyond post-earthquake humanitarian response remains defining a comprehensive resettlement policy. (§17)	• To achieve this, additional leadership, decision-making and a stronger and more strategic HCT is needed. OCHA would also require additional support. High-level Government of Haiti presence at the HCT should also be considered
The goals and objectives of humanitarian response are not always understood. (§52)	
Two-way communication is missing. (§77)	The recently formed advocacy working group or a new one should be formed to follow-up on and inform these processes, provide information to "lead" group and work at other levels with government and with other Haitian actors and eventually define a clearer road map that can further guide transition and address remaining needs. The group should include protection cluster and CCCM/shelter cluster participation.
	The international community in Haiti –HCT, UNCT, G12, Office of the Special Envoy, etc. - needs to coherently convey the need for and consequently support a process of formulating an overall resettlement strategy and plan that can be supported over time and help align efforts.

	The new Housing Authority in Haiti should strive to work under an agreed upon overall resettlement strategy and help define policy. The HCT should also oversee a process that involves redefining an advocacy plan to convey humanitarian concerns, encourage two-way communication with affected populations and national NGOs.
An overall aid coordination system has been lacking. (§63) There has been limited interaction between recovery and humanitarian coordination frameworks. (§64) New frameworks and approaches are needed to overcome weaknesses in coordination across sectors. (§63) The main objectives have yet to be defined for an overarching transition plan that incorporates humanitarian response. (§68) There is lack of clarity on the thresholds of humanitarian response. Emergency response and development needs are intertwined. (§59, §61) There is no collective interaction between humanitarian donors and their development counterparts. (§63) There is limited take-up of humanitarian concerns in longer-term development efforts. (§63) The humanitarian response has helped pilot approaches for recovery that can be continued and replicated. (§ 62) Assistance is being phased out without an effective hand-over strategy. Recovery efforts are not picking up on major areas of need that have been covered by the humanitarian community. As a result, continuing humanitarian needs are largely unmet. (§59, §60)	**R2. Reform and rationalise coordination to foster integration and advance humanitarian concerns and connect humanitarian action with other phases or "categories" (i.e. recovery, reconstruction and development) and stakeholders in the framework of an overall response.** As a start, the HC/RC office could develop a proposal for establishing greater links between the CAP and the ISF, including joint monitoring of progress against established indicators and objectives. ● The HCT should further review its decision-making capacity and define its aspirations and targets for 2012 in terms of how it can engage with the Government of Haiti, development actors and Haitian civil society. ● "Transition and Recovery" as a topic should be systematically made an agenda item at the HCT and in humanitarian donor coordination meetings. Similarly, humanitarian concerns should be a point of discussion in G-12 meetings. ● Had the IHRC's mandate been extended, their representation at the HCT should have been promoted and a "humanitarian aid issues" focus area created within the IHRC (i.e. in a similar way as DRR or other areas are considered). OCHA presence could be encouraged in Ministry of Planning meetings to ensure that humanitarian concerns are considered and progressively dealt with in a durable way. ● The HCT should encourage a new strategic multi-stakeholder exercise and planning process that includes representation from the humanitarian community, takes stock of the current situation and develops a more detailed plan for transition to recovery and development. This should be separate from and done in advance of the CAP MYR exercise which more narrowly focuses on humanitarian needs and is not as inclusive and Haiti specific.

There has been much recent progress on planning for cluster transition. UNICEF has played a key role in advancing cluster transition (§69) The cluster system and the IHRC suffer from a difficult to rectify initial lack of inclusiveness and limited Haitian ownership. (§66) Involvement of Haitian NGOs has been largely unsuccessful. (§66) Focusing on sectoral tables for cluster transition is too limited an approach. (§70) The current system can be further rationalised through merging key objectives of the response. (§68) The system is not yet adapted to geographically based coordination (§70) Information management has to be reviewed in line with outcomes based coordination and information needs. (§73) An overall assessment of need is lacking with the system being highly dependent on the cluster framework. (§73) Mayors have played a key role in the response. (§27, §68, §25) Cross-sector and inter-cluster coordination have been weak. (§28, §65)	**R3. Rationalise and transition the cluster system in Haiti** Continue proactive planning for cluster transition based on objectives. This process should be jointly driven by OCHA , UNDP and UNICEF. Additional support should be sought and provided by the IASC at the global level, OCHA HQ, UNDP/BCPR on cluster transition and coordination on resettlement around key dates, outputs and milestones. The assessment for the rationalization and transitioning of clusters plan can be done through a fourfold process: • A bottom-up approach to understand the array of geographically based coordination needs at a decentralised level, at all scales, from neighbourhood, to communal section, communal, departmental to national. UNDP has a role to play in supporting local governance and a stronger long-term coordination architecture. • A review of future scenarios, understanding plans and priorities of the Government of Haiti under the new presidency, such as new institutions like as the Housing Authority. Also to understand the implications for coordination and the work carried out by clusters to date. • A sector by sector analysis for a sector-wide approach in support of a more coherent, seamless response addressing in parallel the humanitarian issues and recovery and development, as well as strengthening preparedness, decentralization and other cross-cutting issues. • Specific concerted action for key cross-cutting and multi-dimensional issues that tackle important priorities that are fundamental to address humanitarian needs, phase-out assistance (e.g. resettlement and livelihoods) and make way for a coherent framework for coordination.
There is insufficient funding available for the humanitarian response and recovery (i.e. contributions to the CAP and the HRF). (§ 43) The response is costly and its cost has been underestimated. (§38, §46) The CAP's effectiveness as a tool for fundraising is questionable. (§43) IHRC is not considered to be a cost-efficient	**R4. Consider funding, costs and efficiencies** • The HCT and UNCT –supported by the group that was defined to coordinate project submissions to the IHRC - should oversee efforts that review, reassess and quantify funding gaps for both humanitarian action and adequate transition to recovery and define a coordinated fundraising strategy. • The ERC and HC should reach out to specific donors also at the HQ level to obtain funding and additional capacity through staff secondments in priority under resourced areas like protection.

structure. (§21)	• Donors should provide flexible funding commensurate to priorities outlined in joint humanitarian and recovery and plans.
Areas like protection are under-resourced. (§37)	• The Government of Haiti and donors should underline the need for minimum transaction costs.
Lack of funding prospects acts as a disincentive to planning transition. (§59)	• Make better use of the CAP instrument for fundraising. Distinguish between overall needs and the humanitarian community's capacity to deliver.
	• Factor-in cost and efficiency considerations across the response. Reconsider recovery project implementation mechanisms in favour of less overheads, reduced levels of subcontracting, and less lagtime for procurement and implementation.
	• Given the cost of human resources, attention should be paid to prioritising use of time and more efficient processes (e.g. drafting and approving policy papers, limiting meetings, etc.)
	Human resource policies and practices specifically for UN agencies should be revised to become more flexible and better adapted to the needs of the response (e.g. hiring national staff, rapid short-term deployments, etc.)
Haiti faces multiple vulnerabilities (§16) and not all elements of DRR have been considered in the response. (§36)	**R5. Support capacity-strengthening and retain capacity in priority areas**
Ability to tackle issues has depended on information available, whether there is dedicated cluster, sub-cluster, working group or human resource capacity (§35)	• Prioritise DRR efforts over time which should be further integrated into development. OCHA/Clusters need to continue to focus on building the capacity of national actors
Protection at this key juncture is viewed as increasingly critical. (§37)	• Ensure that space for focusing on key humanitarian needs is retained in a transitioned framework through a more connected OCHA (e.g. with increased presence in the recovery and development coordination efforts) and additional capacity at the level of the HC/RC office.
The absence of a resettlement policy has been a major gap. (§33)	• Dedicate more resources and capacity to protection issues at this key juncture through PROCAP continued secondment of capacity to the protection cluster, additional resources to work at the commune level.
National capacities are still weak. (§42)	• Seek global-level guidance on the multi-sectorial challenge of resettlement.
Capacity-building takes time, goes hand-in-hand with engagement and is necessary for the sustainability of efforts. (§ 56, § 59)	• Cluster lead agencies should embed cluster coordination capacity in their programme to support counterparts and be in a position to help reactivate the cluster if needed.
	UN human resource practices should be reviewed to make better use of existing rosters, allow for temporary redeployment, considering the capacities of partners and be able to place Haitian staff in key roles.

ANNEXES TO THE INTER-AGENCY STANDING COMMITTEE'S
INTER AGENCY REAL TIME EVALUATION OF THE RESPONSE TO THE
HAITI EARTHQUAKE, TWENTY MONTHS AFTER

INTER-AGENCY REAL-TIME EVALUATION (IA RTE) OF THE HUMANITARIAN RESPONSE TO THE EARTHQUAKE IN HAITI, PHASE II

Terms of Reference

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1.   INTRODUCTION

The Inter-Agency Real-Time Evaluations (IA RTEs) are an initiative of the Inter-Agency Standing Committee IASC). They can be defined as evaluations which almost simultaneously feed back findings for immediate use by humanitarian community, and which are primarily intended for sudden-onset disasters or protracted crises undergoing a phase of rapid deterioration or escalating violence. One-phase IA RTE would be carried out at the early implementation stages of a humanitarian operation and consist of remote monitoring and a field mission, whereas a multi phase approach would include a second, follow up evaluation mission (with a different focus corresponding to real time needs at that stage in the response).

Inter-Agency Real-Time Evaluations seek to resolve inter-agency coordination problems or operational bottlenecks and provide real-time learning to the field. They differ from other forms of humanitarian evaluations in their speed, coverage, methods, and outputs. Inter-Agency Real-Time Evaluations are also typified by their shared management and methodological oversight through global and national level inter-agency support, management and advisory groups; speed of mobilization, feedback and follow-up; light, agile approaches; restricted scope; and participatory methods.

2.   BACKGROUND TO THE CRISIS

Haiti is the poorest country in the Caribbean, with 72 percent of the population living on less than two US dollars a day, and a high level of income inequality. The Integrated UN Stabilization Mission for Haiti (MINUSTAH) has been present in the country since 2004, mandated by the Security Council to strengthen security, governance and the rule of law following the period of political unrest and violence.

On 12 January 2010, a 7 magnitude earthquake struck Haiti, devastating Port-au-Prince, the capital city, and various areas in l'Ouest and Sud-est départements. The earthquake affected over 3 million people, approximately 222,650 of which were killed and 310,930 injured. At the peak of displacement, close to 2.3 million people left their homes, including 302,000 children. Over 400,000 buildings are estimated to be damaged or destroyed, including sixty percent of government and administrative buildings, the Presidential Palace, parliament and cathedral, as well as 80 percent of schools in Port-au-Prince and 60 percent in the Sud and l'Ouest départements.

The impact on national response capacity was severe. More than 16,000 civil servants died in the earthquake and many left the country after. The Haitian government lost 33 percent of its officials and the United Nations lost 102 staff members.

At an international donors conference held in New York in March 2010, 55 donors together pledged a total of $4.58 billion in grants in 2010 and 2011 for rebuilding the country; of that, $1.74 billion (38

percent of the pledges), have been disbursed as of June 2011[84]. At the time of this evaluation, eighteen months after the earthquake, massive humanitarian response has developed in context of multiple crisis, including cholera epidemics, hurricanes, and political and security challenges.

3.   RATIONALE

In view of the scale of the disaster and the subsequent response, the Inter-Agency Standing Committee (IASC) launched an Inter-Agency Real-Time Evaluation (IA RTE) in Haiti to inform decision-makers at national and headquarters levels, draw lessons and allow corrections to be made where necessary. The IA RTE in Haiti has been envisaged as a multiphase process[85]. The first phase took place three months after the earthquake and focused on the ongoing humanitarian response. The second phase of the IA RTE in Haiti will be forward looking and focus on transitional issues and connectedness to longer-term recovery processes.

These Terms of Reference are based on the preparatory mission to Haiti conducted by members of the IA RTE Haiti Management Group between 1st and 11th March 2011. They were further refined following the visit to Haiti by the Evaluation Team Leader and Evaluation Manager, conducted between 18th and 22nd of July 2011.

4.   USE AND OBJECTIVES

The main objective of the Inter-Agency Real-Time Evaluation is to assess the current phase of the humanitarian response and provide real time feedback and input into on-going decision making in the field. The IA RTE will provide snapshots of the situation and real-time feedback and learning to the HCT, as well as local IASC, Clusters, NGOs involved in the humanitarian response, and Government of Haiti at various levels. This will enable the adoption of corrective actions as needed.

The evaluation will in this way support the ongoing operational planning of the Humanitarian Country Team (HCT), which will be the most immediate user of the feedback and recommendations.

The evaluation will identify the extent to which the humanitarian response achieved the key objectives, including addressing in a timely and meaningful way the needs of all segments of the affected population. The key objectives are to:

→   Analyse and provide lessons for the ongoing response, with a particular focus on coordination between different actors involved;
→   Examine options for linking humanitarian response structures with government-established mechanisms; and
→   Analyse the extent to which the findings and recommendations from the first phase of the Inter-Agency Real-Time Evaluation have informed the evolving humanitarian response in Haiti.

The evaluation will seek to identify lessons with regards to community and area-based approaches and durable solutions.

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[84] Haiti Reconstruction Fund Annual Report, World Bank July 2011
[85] The initial plans for the multi-phased IA RTE in Haiti included a separately managed inter-agency survey of affected population; the findings of the survey were to form a part of the evidence base for this and future evaluations. Due to the cancellation of the survey, the evaluation will rely instead on consultations with the affected population.

5.   SCOPE

The second phase of the Inter-Agency Real-Time Evaluation will cover the humanitarian response to the earthquake in Haiti from the end of fieldwork for the first phase of the evaluation (May 2010) until the beginning of the evaluation (August 2011). The evaluation will cover all sectors of the humanitarian response in affected départements of Port au Prince, l'Ouest and Sud-est.

6.   FOCUS

The IA RTE will focus in large part on the effectiveness and efficiency of the coordination and management systems, addressing critical issues related to both the provision of relief and transition to recovery. The following issues form the focus of the evaluation:

1   Main Achievements, Coverage and Gaps

1.1   How timely and successful is the humanitarian response in delivering against stated objectives/indicators?
1.2   To what extent have critical needs and gaps been identified and addressed in a timely way, both between and within clusters?
1.3   How effectively are cross-cutting issues[86] being addressed in the humanitarian response?
1.4   How adequately are recovery considerations and the basic tenets of disaster risk-reduction (DRR) incorporated into the humanitarian response[87]?
1.5   How effective is the humanitarian community in adapting to responding in urban environment and adopting community-based approaches?
1.6   What is the humanitarian system's level of commitment and compliance to humanitarian principles and standards?

2   Critical Factors and Their Impact on the Effectiveness of the Humanitarian Response

2.1   Which critical factors (e.g. security events, infrastructure, government capacity, legal/policy issues) help explain why the response was or was not delivered in a timely and adequate manner?
2.2   How effective was the humanitarian community in identifying and addressing the constraints on the response?
2.3   Has the capacity of the Haitian government at all levels been adequately assessed? How well targeted and effective are capacity building efforts?
2.4   What were the effects of subsequent natural disasters and cholera epidemics on the humanitarian response to the earthquake in Haiti?

3   Consistency and Connectedness of the Goals of the Humanitarian Response with Those of the Counterparts

3.1   How clear, coherent and well articulated are the mandate, goals and objectives of the humanitarian response?

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[86] e.g. protection, gender, HIV/AIDS, environment, early recovery
[87] assessments, planning and provision of..

3.2   How adequately are national context and the coping mechanisms of the population being taken into account in planning and provision of assistance?

3.3   To what extent have the objectives and strategies of the Haitian government and various development actors present been taken into account when planning for the humanitarian response and transition to recovery?

3.4   How effective is the humanitarian community in ensuring that humanitarian concerns are taken into account in planning for the longer-term recovery processes? Why or why not?

4   Coherence of Coordination Mechanisms Established

4.1   How relevant, inclusive, and coherently interlinked and have various appeals, strategies and operational plans (e.g. the Flash Appeal, PDNA, CAP, RF and the National Recovery Plan) been? To what extent have these been based on timely and informed analysis?

4.2   How connected/coherent are the different coordination mechanisms for humanitarian response, transition and recovery established between the humanitarian and development actors, Government of Haiti, Interim Haiti Recovery Commission, and MINUSTAH[88] at all levels?

4.3   How effective is the engagement of the humanitarian actors with the Haitian government, Haitian civil society, affected population, and private actors? What were/are the main challenges?

5   Transition strategies of clusters and options for linking/merging them into government structures

5.1   How effective is cluster and inter-cluster coordination (with specific focus on cross-cutting issues and early recovery)?

5.2   How connected are clusters with the government structures at various levels? To what extent have the options for further linking/merging the clusters into government structures been examined? Have appropriate transition strategies been defined and developed for clusters?

5.3   In what ways, if any, have national and local capacities been capitalized on and strengthened?

6   Sustainability of basic service provision by NGOs and the UN in the context of drying up of funding for humanitarian needs and major actors leaving

6.1   To what extent have sustainability, costs and benefits of substitution of basic service provision by NGOs/UN have been assessed and taken into account when planning for humanitarian response and transition?

6.2   How have the effects of the exit or decreased presence of humanitarian actors engaged in the response been assessed and factored in planning and advocacy for humanitarian and recovery response?

6.3   How have the effects of potential changes in MINUSTAH mandate been analysed and incorporated in planning for the response?

6.4   Have funding flows been sufficient, both in quantity and timeliness, so as to allow humanitarian actors to respond effectively to both humanitarian and early recovery needs? How adequate is the continuity of funding? How flexible is the funding available to the changing context and needs?

7   Evidence-based decision making

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[88] The evaluation is expected to map various coordination mechanisms established, their composition, mandates and interlinkages; this information should be presented as an Annex to the final evaluation report

7.1　　　How adequate and timely is statistical evidence on contextual factors (e.g. needs/movements/coping strategies of the population, degree of infrastructure destruction) to the needs of operational decision making?

7.2　　　Does analysis of needs, vulnerabilities and capacities include variant effects on men and women, girls and boys, and vulnerable groups? Has the disaggregated data (by age and gender) been available to inform the analysis?

7.3　　　What systems have been put into place to monitor, report and evaluate the efficiency and effectiveness of the overall response?　How adequate are these for measuring progress against objectives?

7.4　　　To what extent have previously identified lessons and the conclusions and recommendations of evaluations and reviews conducted, and in particular the first phase of the Inter-Agency Real Time Evaluation, been incorporated into the humanitarian response? Why or why not?

7.　　　METHODOLOGY

The applied methods for IA RTE shall be light and participatory. The evaluation will be conducted by a team of independent experts. The evaluation will be carried out through analyses of various sources of information including desk reviews; field visits; interviews with key stakeholders; and through cross-validation of data. While maintaining independence, the evaluation will seek the views of all parties, especially the affected population. Evaluation teams will serve as 'facilitators', encouraging and assisting field personnel, both individually and collectively, to look critically at their operations and find creative solutions to problems.

In order to best prepare the evaluation team for the upcoming evaluation, members of the IA RTE Management Group will provide them with relevant information and also request relevant data from the HCT in this regard (situation reports, needs assessment reports, key messages, timelines of key decisions, HCT & cluster meeting minutes, main contact lists of key humanitarian stakeholders). The data will be handed over confidentially to the evaluation team to carry out a desk review in advance of the field mission.

8.　　　STAKEHOLDER INVOLVEMENT

The evaluation team will consult staff from UN agencies, international NGOs, national NGOs, national stakeholders, government and donor organizations, as well as military actors, and is expected to engage in extensive consultations with affected population.

Inter-agency technical and policy support will be provided through the IA RTE Support Group.

The in-country Advisory Group for the evaluation may be formed by members of the HCT on a voluntary basis. The main role of the In-Country Advisory Group is to provide feedback and advice to the evaluation team throughout the RTE process including at the planning phase, during the mission phase as well as during both the post-mission and follow-up phases when any corrective actions identified are being implemented. AG members are also expected to attend any debriefing workshops, review and provide input on draft reports, and help coordinate the follow up process.

Specific tasks of the Advisory Group may include the following:

→ Provide inputs into the RTE work plan based on the final Terms of Reference,

→ Provide relevant documents and a list of relevant contacts

→ Provide inputs into a planned schedule of field visits, including advice on the appropriate sites to be visited and key stakeholders to be consulted

→ Provide advice and support to the IA RTE team to help prioritize key issues

→ Ensure that in-country agencies involved in the response are kept advised and informed on the RTE plans, objectives and findings as they emerge

→ Represent agency views and concerns on key inter-agency coordination issues and challenges

→ Participate in debriefings with the RTE team on key findings at select points during the evaluation,

→ Ensure that this feedback is shared with their own agencies, and as appropriate, provide input and initiate potential corrective actions.

→ Provide advice on the development of suitable modalities for organizing real-time feedback prior to the RTE team's final departure from the country

→ Co-ordinate agency and country-level feedback on documents related to the IA-RTE (i.e. Executive Summary, drafts of the final report)

→ Provide advice to the HC and the HCT on the development of appropriate follow-up plans linked to RTE recommendations

→ Assist in monitoring the implementation of follow-up plans.

The team will report its findings to all members of the HCT (Clusters, IASC locally) and their international and local counterparts in Haiti (including Red Cross and Red Crescent Societies, IOM, local NGOs, government etc.) during a series of workshops planned for the week of 26th September 2011. Presentations in New York will follow within two weeks of the consultants' return from the field mission.

9. MANAGEMENT ARRANGEMENTS

The Inter-Agency Real-Time Evaluations are overseen by the IASC IA RTE Support Group. Overall management of the second phase of the Haiti IA RTE will be conducted a smaller management group (MG), led by the evaluation manager from OCHA. The management group is chaired by OCHA and comprises of representatives from FAO, ICVA, IFRC, UNICEF and WHO, with the participation of DFID for the DAC Haiti Evaluation Task Force.

Management group members will be expected to:

→ Manage the entire evaluation process (including financial resource mobilization, inputting into the Terms of Reference, team recruitment, reviewing the inception report, reviewing draft reports) for the particular phase;

→ Offer in-country support during critical phases of the evaluation and travel to Haiti as needed;

→ Monitor and assess the quality of all outputs on the evaluation;

→ Provide guidance and institutional support to external experts(s), especially on issues of methodology;

→ Approve the final IA RTE report;

→ Represent the participating agencies in discussion with experts(s) conducting the IA RTE;

→ Represent the participating agencies in dealings with the UN country team, donor representatives and NGO communities;

→ Keep the IA RTE support group advised on key developments throughout the evaluation.

The evaluation team will report to the management group, through the evaluation manager.

All evaluation products will first be submitted to the evaluation manager, representing the management group, and will then be shared with the advisory group, humanitarian country team, other relevant in-country stakeholders and the IASC members through wider IA RTE support group .

11.   EVALUATION TEAM: Competency and Expertise Requirements

The evaluation will employ the services of a consulting company/research institute which will probably consists of a team of 2 international and 1 or 2 national consultants. Evaluation team must be gender and age balanced, and embody the following collective experiences:

→   Proven senior-level experience and ability to provide strategic recommendations to key stakeholders;

→   The evaluation team should include development, capacity building and urban planning experts, and perhaps an anthropologist;

→   Excellent knowledge of relocation strategies and reintegration, recovery and capacity development. Familiarity with issues of transition in fragile states. Understanding of the private sector and recovery agencies (e.g. World Bank, IADB);

→   Good knowledge of strategic and operational management of humanitarian operations, preferably in Haiti; the ability to bring on board national consultants(s) from Haiti would be an asset;

→   Good knowledge of humanitarian system and its reforms, including of UN agencies, IFRC, NGOs, and local government disaster response structures and systems;

→   Demonstrated experience in conducting evaluations of humanitarian programmes and the capacity to work collaboratively with multiple stakeholders and on a team;

→   Strong experience in key sectors and/or in cross-cutting issues;

→   Strong analytical skills and ability to clearly synthesize and present findings, draw practical conclusions and to prepare well-written reports in a timely manner;

→   Strong workshop facilitation skills;

→   Excellent writing and presentation skills in English and French; and

→   Immediate availability for the period indicated.

12.   REPORTING REQUIREMENTS AND DELIVERABLES

1.   Field visits to Port-au-Prince and Sud, Sud-Est, and Ouest départments to gather information and evidence on issued described in this ToR. Field visits will take place over a three-week period.

2.   A brief (up to 5 pages) inception report, outlining key questions the evaluation will address , primary stakeholders and main methodological and organizational issues, to be submitted within 5 days of the beginning of the fieldwork.

3.   Draft executive summary of the report, containing a matrix of findings, conclusions and recommendations.

4.   A series of presentations and lessons-learnt workshops[89] to HCT in Haiti on all levels (capital and departments Jacmel and Leogane). The workshops are considered, together with the final evaluation report, as the primary output of the evaluation. The purpose of the workshops is to present and discuss findings, conclusions and recommendations and reformulate them if necessary and to identify key actors and timelines to responds to these recommendations. The workshops should be carried out after completion of draft executive summary of the IA RTE report.

5.   An outcome summary (2-5 pages) of proceedings of the workshops, to be completed within one week after they take place.

6.   A draft IA RTE report, to be completed within three weeks after the field mission. A draft report will be submitted to the HCT and IA RTE Management Group, who will be afforded seven days to comment. The document will subsequently be disseminated to a wider audience for comment.

7.   A final RTE report containing an executive summary of no more than 2,000 words and a main text of no more than 10,000 words, both inclusive of clear and concise recommendations. The outcome summary of workshops proceedings shall become an integral part of the final RTE report. Annexes should include a list of all individuals interviewed, a bibliography, a description of method(s) employed, and any other relevant materials. The final report will be submitted one week after the reception of stakeholder comments to the draft report.

8.   A matrix outlining comments received to the draft evaluation report, whether they were accepted, partially accepted or rejected, and if partially accepted or rejected, the rationale for that decision.

The evaluation team is solely responsible for the final products. While maintaining independence, the team will adhere to professional standards and language, particularly that which may relate to the protection of staff and operations. Direct consultations with affected populations will be a formal requirement of the evaluation unless security conditions are overriding. Additionally, the Evaluation Manager will be consulted prior to the dissemination of any products emanating from the evaluation.

All analytical results and products arising from this evaluation will be owned by the IASC RTE Support Group. The team leader and/or members will not be allowed without prior authorization in writing to present any of the analytical results as his/ her own work or to make use of the evaluation results for private publication purposes.

All external evaluation reports will be submitted to ALNAP for inclusion in the regular meta-evaluation process that rates the quality of evaluation reports.

10.   DURATION OF EVALUATION AND TENTATIVE TIMEPLAN

Action/event	Projected Dates
TRIGGERING AND REMOTE MONITORING PHASE	Done

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[89] Places for the workshops : Jacmel for Départements du Sud / Sud-Est ; Leogane for Département de l'Ouest ; Port-au-Prince for Haïti overall. Workshops format : 1 day -hrs workshops happening each day from 09h00-13h00 with lunch at the end. Debriefing in country to DSRSG/ HC/RC

PREPARATORY EVALUATION MANAGEMENT MISSION	Done
Scoping mission by the evaluation management to identify key questions and issues, as well as to explain processes.	1 – 11 March 2011
MISSION ON TRANSITION	
Hiring of Consultants – Contract signed	15-Jul-11
Preparatory mission to country – team leader and evaluation manager	18 – 20 July
Field visits: Mission to the country – interviews, field visits	20 August 2011 - 7 September 2011
HQ interviews: New York	8 - 9 September
DRAFT EXECUTIVE SUMMARY	15 September
Field visits: IN-COUNTRY WORKSHOPS	26 – 30 September
FIRST DRAFT	4 October
Commenting on 1st draft	4 - 15 October
FINAL DRAFT	21 October
Final Check & Approval by ad-hoc Management Group of Final Report	30 October
Debriefing in New York and / or GVA	November

Annex 2: Report on the focus group held with Haitian staff involved in the humanitarian response

**ÉVALUATION INTER-AGENCES EN TEMPS RÉEL DE L'INTERVENTION HUMANITAIRE
EN HAÏTI SUITE AU TREMBLEMENT DE TERRE - PHASE II**

**COMPTE-RENDU DE LA RENCONTRE AVEC DES REPRÉSENTANTS DU STAFF NATIONAL D'ONG LOCALES
ET INTERNATIONALES, D'AGENCES DES NU**

DATE : 30 août 2011
LIEU : Salle de conférence de CONCERN
PARTICIPANTS : Voir liste en annexe

La réunion a commencé à 9h30 avec les propos de bienvenue de la Consultante Nationale, Marie Pascale Théodate, qui a présenté les deux autres membres de la mission d'évaluation, Silvia Hidalgo (Chef d'équipe) et Eva Faye. P. Théodate a rappelé le mandat de l'équipe d'évaluation et l'ordre du jour de la réunion.

8 PRINCIPALES RÉALISATIONS, COUVERTURE ET LACUNES

1.1 RÉALISATIONS

Ramassage des déblais : momentum assez serré.

L'action humanitaire a été très efficace dès l'apparition des premiers cas de choléra, ceci grâce à la coordination entre la communauté humanitaire et le Gouvernement pour faire face à l'épidémie, ce qui a permis de limiter l'expansion de la maladie. Grâce aux services de base qui étaient offerts dans les camps et également aux activités de sensibilisation et d'information, il a été possible de réduire la propagation de la maladie.

L'engagement de la DINEPA dans la fourniture d'eau potable constitue l'un des principaux points positifs. Cet organisme essaie d'être présent dans les communes. Les interventions dans le monde urbain sont plus difficiles. Dans le monde rural, les entités dénommées Comités d'approvisionnement d'eau potable ont été prévues en vue de garantir la durabilité des interventions.

L'accès aux soins de santé a été possible grâce aux ONG à travers les cliniques mobiles et fixes. L'action positive de certains acteurs en termes de renforcement de capacité nationale a été notée. À titre d'exemple, MSF a organisé une formation pour les cadres du Ministère de la Santé Publique et de la Population (MSPP) avant de faire une passation de ses activités audit Ministère.

La mise en place des clusters a été une étape importante dans la définition de mécanismes en vue d'un meilleur cadrage de l'aide humanitaire. Le système de clusters a été une réussite en ce sens qu'il a facilité la collecte de l'information et la coordination de l'aide humanitaire. À Léogane, à titre d'exemple, c'est à travers le cluster que les négociations ont été engagées pour la relocalisation.

Certaines institutions, comme le PAM, constate des progrès réalisés par des organisations de base avec lesquelles il travaille. C'est le fruit des efforts consentis par le PAM dans le cadre d'un partenariat avec des organisations locales (révision des projets, des budgets à titre d'exemple).

La MINUSTAH a facilité la distribution de l'aide humanitaire. Les interventions dans les zones dites rouges ont été particulièrement appréciées compte tenu du contexte difficile dans lequel il fallait travailler. Les soldats de la MINUSTAH ont assisté les femmes âgées, les enfants lors des distributions; leur présence était nécessaire pour le maintien de l'ordre et l'assistance aux plus vulnérables.

L'une des structures de l'État qui fonctionne, c'est la DPC dont la majeure partie du personnel est constituée de bénévoles.

1.2   COUVERTURE

Les opérations humanitaires étaient en grande partie limitées aux camps alors que la majorité de la population vit en dehors des camps et demeure dans une situation critique en termes d'accès aux services de base. En privilégiant ainsi cette approche, on constate que le camp a remplacé la communauté créant des conflits entre les populations vivant dans leur quartier d'origine et celles vivant dans les camps.

Le critère de sélection des bénéficiaires a été principalement le camp, limitant ainsi l'accès à des services de base à la majorité de la population, celle qui ne vit pas dans les camps. Il est vrai que les problèmes d'accès aux services de base existaient avant le séisme. Cependant, la population affectée par le séisme ne se limite pas à celle des camps.

1.3   LACUNES

Il n'y a pas eu une utilisation rationnelle des débris dans le cadre d'une éventuelle reconstruction.
Pour ce qui est de l'utilisation des clusters en tant que mécanismes de coordination de l'opération humanitaire, certaines faiblesses ont été notées; ces mécanismes sont quelque peu limités en ce sens qu'ils ont permis une meilleure coordination des interventions liées à l'urgence seulement. Des questions jugées primordiales telles que le renforcement des capacités locales dans le cadre de la gestion de l'urgence, l'implication des autorités locales dans la réflexion sur les problèmes de logement n'ont pas été adressées (Exemple de Turgeau : des ONG voulaient nettoyer ce quartier des débris pour relocaliser les déplacés du Champ-de-Mars, ceci sans la participation de la Mairie de Port-au-Prince qui cependant en tant qu'autorité est appelée à gérer tout conflit entre les propriétaires de ces propriétés et les déplacés). Selon les participants à la rencontre, les mêmes problèmes vont surgir si une autre catastrophe naturelle devait toucher le pays. Les autorités ne participaient pas vraiment aux clusters au début des opérations, ce qui a facilité le contrôle des activités par les internationaux. Ce n'est qu'à partir de mai 2010, que l'État central, surtout le Ministère de la Santé Publique et de la Population (MSPP) a intégré les clusters.

En ce qui a trait au secteur santé, la gratuité des soins a facilité l'accès à un nombre important de victimes du séisme. Cependant, l'une des faiblesses notées demeure la forte dépendance vis-à-vis des opérateurs internationaux qui gère à 80-90% l'offre de santé. Cette situation a conduit à la fermeture de certaines structures hospitalières haïtiennes. De plus, une perte de contrôle par les autorités haïtiennes du type de médicaments offerts à la population a été également observée.
Les mécanismes de suivi n'étaient pas adéquats. À titre d'exemple, des malades ou victimes du séisme transférés sur des bateaux pour y recevoir des soins de santé et qui, une fois ces bateaux partis, ne pouvaient poursuivre le traitement alors que des rendez-vous avaient été fixés.
Les risques de propagation du choléra n'ont pas été adéquatement adressés par des ONG qui n'ont pas nécessairement la capacité ou les compétences en termes de gestion de déchets par exemple. Vu les

capacités existantes, le choléra n'aurait pas dû franchir les limites de l'Artibonite où les premiers cas ont été recensés.

Les besoins immédiats de la population (nourriture, eau potable, etc.) ont été adressés dès le lancement des opérations humanitaires. Par contre, quelques mois après le séisme, la situation a dégénéré dans les camps suite à l'augmentation considérable de la violence avec notamment des cas de viols touchant les femmes, les adolescentes et même des fillettes. La suspension des activités de distribution de nourriture, d'alimentation en eau potable, à titre d'exemple, a aggravé les conditions de vie jugées précaires de la population vivant dans les camps.

Dès le 14 janvier 2010, de nombreuses ONG sont venues au secours de la population haïtienne. Après mai 2010, les observateurs notent l'arrivée d'une autre catégorie d'ONG cherchant surtout à tirer profit de la situation. Les ONG locales et internationales présentes sur le terrain avant janvier 2010 affirment être victimes de l'invasion de ces ONG qui en raison de leurs actions ont créé un climat de méfiance.

Des mécanismes de concertation existaient au sein de la société haïtienne avant le séisme. En dépit des conséquences de cette catastrophe naturelle, ces mécanismes fonctionnaient après le 12 janvier mais n'ont pas été exploités à bon escient par la communauté humanitaire. Les structures locales n'ont pas été utilisées. L'approche retenue consistait à travailler avec des individus au lieu de privilégier un partenariat avec les organisations de base. Ces individus ont certaines fois joué le jeu des acteurs internationaux en recherchant les opportunités d'emploi. À titre d'exemple, une plateforme d'ONG qui constituait le comité de liaison entre les ONG, a été écartelée dans la dynamique de réponse. Les forces contradictoires à l'intérieur de la réponse humanitaire ont affaibli cette plateforme. Des acteurs importants comme les universités n'ont pas été impliquées dans le processus.

Les ONG locales qui constituent le lien entre la population et les acteurs internationaux, remettent en question la forme de collaboration actuelle qui repose sur l'utilisation des organisations locales pour la collecte d'informations mais sans perspectives d'un vrai partenariat. De plus, les pratiques salariales des organisations internationales ont créé des conflits au sein de la société en raison du manque de compétitivité des institutions nationales qui en raison de contraintes financières ne peuvent offrir des salaires alléchants.   Les pratiques des ONG (pas seulement salariales) ont affecté l'économie nationale, tout particulièrement la production nationale déjà affaiblie par le séisme. La réponse humanitaire ne doit pas venir remplacer ce qui existe sur le plan local. Il aurait fallu renforcer la capacité des fournisseurs locaux, après la phase d'urgence, leur permettant ainsi de profiter des opportunités.

Un manque de coordination est également noté pour ce qui est de l'évaluation des besoins. Les participants ont à titre d'exemple souligné le fait que des Comités de camp donnaient des chiffres très différents et exagérés.

Le renforcement des capacités nationales demeure jusqu'à présent l'une des principales faiblesses de l'opération humanitaire. Les nationaux s'attendaient, dans le cadre de la transition, à ce qu'il y ait moins d'expatriés sur le terrain et ainsi la possibilité d'inclure des nationaux formés dans les différentes structures, leur offrant ainsi la possibilité de mettre en pratique les connaissances et compétences acquises. Malheureusement, les postes clefs sont encore occupés par des expatriés. Les nationaux qui ont été intégrés dans ces institutions internationales, n'ont malheureusement pas voix au chapitre.

Les participants à la rencontre ont mentionné le cas d'une ONG internationale qui s'est installée dans le Nord-Ouest suite à l'apparition du choléra. Aucune formation sur la prise en charge de cette maladie n'a

été dispensée à l'intention du personnel haïtien par cette ONG, d'où l'incapacité des nationaux à faire le suivi au départ de l'organisation internationale.

Il n'y a pas eu de prise en charge des personnes à besoins spéciaux lors des distributions.

Les besoins de la population en termes de moyens de subsistance n'ont pas été adressés. Ces besoins vont au delà des opportunités offertes par le *Cash for Work*, qui répond à la nécessité d'injecter des capitaux dans l'immédiat mais ne rentre pas dans une logique d'actions structurantes.

L'État et les acteurs internationaux ont raté l'occasion de conduire des activités de sensibilisation et de formation. Citons le planning familial à titre d'exemple.

La réponse humanitaire est restée dans une phase d'urgence. Selon les participants à l'atelier, ceci s'explique d'une part par le manque de vision et de capacité du côté haïtien (pas de réceptacle pour l'assistance externe, manque de vison de la bourgeoisie haïtienne) et d'autre part, par le manque de volonté de la communauté humanitaire de sortir du statu quo.

Une occasion unique s'est présentée de renforcer le Ministère de la Planification et de la Coopération Externe (MPCE), organe de tutelle des ONG. Malheureusement, les différents acteurs impliqués, incluant le MPCE n'ont pas su profiter de cette opportunité.

Il y a une dimension urbaine qui a été difficile à construire dans un tel contexte (manque de transmission de savoir et de cohésion sociale).

9 **LES FACTEURS CRITIQUES ET LEUR IMPACT SUR L'EFFICACITÉ DE L'INTERVENTION HUMANITAIRE**

Le contexte politique a constitué un élément de blocage surtout à la période des élections (enjeux politiques et tentatives de corruption du processus électoral).

Dans d'autres pays touchés par des catastrophes naturelles, il existait déjà une structure, un réceptacle pour faciliter la coordination des activités.

Le séisme s'est produit dans un contexte mondial particulier alors que des débats sont en cours sur le mandat des Nations-Unies, ce qui a des effets sur Haïti en mettant l'accent sur les enjeux dans une réponse comme celle-ci.

Le manque de réflexion sur les problèmes actuels qui se posent beaucoup plus en termes de logement définitif (définition d'une politique, solutions aux problèmes fonciers, etc.), d'opportunités d'emplois, de recapitalisation pour les entreprises notamment n'a pas facilité la recherche de solutions durables.

10 **COHÉRENCE ET INTÉGRATION DES OBJECTIFS DE L'INTERVENTION HUMANITAIRE ET DE CEUX DES AUTRES ACTEURS**

De nombreuses ONG se sont installées en Haïti après le séisme sans objectifs, sans plan d'action et sans capacité réelle d'adresser les problèmes de la population. Cette invasion d'ONG a eu de plus des effets négatifs sur les économies locales. Il convient également de souligner le manque d'expertise de certaines ONG dans la gestion de camps.

Un manque d'articulation entre le discours du Gouvernement et celui de la Communauté humanitaire est observé. En effet, depuis avril – mai 2010, l'Etat Central à travers le Président de la République a publiquement annoncé la fin des actions humanitaires et le lancement de la transition vers la reconstruction. La Communauté humanitaire demeure dans cette logique de l'humanitaire alors que des interventions marquant le début de la transition n'ont pas été engagées.

Avant le séisme, le DSNCRP constituait le document de référence en matière de développement. En mars 2010, le PDNA a été approuvé. Aucune adaptation n'a été faite, encore moins le lien entre ces documents pour renégocier avec les partenaires. La tendance a été plutôt de financer d'autres projets qui ne s'inscrivaient pas dans le cadre du plan en vigueur.

11 LECONS ET RECOMMANDATIONS

Il convient de proposer des solutions qui répondent à la réalité haïtienne (l'exemple des modèles de latrines utilisés en Afrique). Les *shelters*, à titre d'exemple, devraient être écartés comme solution pour être remplacés par des maisons. Plus de 18 mois après le séisme, il ne peut être question de shelters comme solution aux problèmes de logement.

Les ONG internationales se sont contentées de reproduire ce qu'elles ont fait ailleurs sans chercher à innover ou à proposer des modèles mieux adaptés à la réalité haïtienne. L'un des premiers principes de l'humanitaire à savoir la réutilisation des matériaux n'a pas été appliqué.

Il aurait fallu profiter de l'opportunité offerte par le séisme pour adresser les problèmes structurels et ainsi faire le lien entre l'humanitaire et le développement.

Il faut éviter que la réponse cause des torts non créés par le séisme.

Les Haïtiens ont appris à gérer jusqu'à un certain point les crises qui ont touché le pays : le choléra, le séisme, les intempéries. Il y a suffisamment de ressources humaines en Haïti pour mener des activités au niveau local. Il faudrait donc privilégier les ONG locales et ainsi valoriser les ressources nationales. Au niveau de la diaspora également, les ressources existent. Un effort ciblé permettrait de les intégrer dans le processus de reconstruction.

Le système des clusters a permis de mieux coordonner la réponse humanitaire au niveau communal.
Le manque de transparence dans la gestion des fonds est l'une des lacunes qu'il faudrait combler dans les prochaines interventions (redevabilité).

Il convient de renforcer la gouvernance locale, plus spécifiquement les municipalités.

Les interventions futures doivent s'inscrire dans un cadre plus global (dépassant celui de la réponse au séisme) comme celui du DSNCRP ou du PDNA (des actions structurelles en vue d'adresser également les problèmes des populations vivant dans les bidonvilles ou tout simplement de l'ensemble de la population haïtienne).

C'est l'instinct de survie qui porte la communauté humanitaire à privilégier la réponse humanitaire. Les ONG internationales et les agences des NU doivent tisser de nouveaux liens avec les acteurs locaux afin que s'installe un climat de confiance. Elles se doivent également de respecter les promesses faites en tenant compte des besoins exprimés par les populations et surtout d'assurer le suivi.

De cette expérience, un ensemble de leçons peuvent être tirées et dont pourraient bénéficier d'autres pays face à une catastrophe de la même ampleur :

- Être mieux formé et informé de la situation du pays;
- Apprendre à connaître l'interlocuteur, la population affectée, ses coutumes (la gestion de l'eau dans les bouteilles VS gestion des déchets);
- S'asseoir sur quatre piliers : Être humain, faire la communication avec la population qui doit participer, préciser ses attentes et la façon de faire, le projet doit atterrir.
- Envisager des plans intégrés (exemple de latrines construites pour une école alors qu'il n'y a pas de citerne);
- Engager une réponse immédiate pour sauver des vies;
- Maintenir un cadre de concertation tout au long du processus;
- Déterminer le seuil pour passer de la réponse immédiate à la transition vers la reconstruction. Ne pas s'établir dans le mode « urgence ».

La réponse humanitaire doit comprendre deux phases :
- La première : aide massive d'où la nécessité de connaître le marché.
- La seconde : le ciblage en réponse à l'évolution des besoins pour ne pas affaiblir les structures locales.

Il faut exiger une coordination pour ne pas détruire le système qui existait (par exemple, des institutions qui offrent des salaires plus élevés que ceux des nationaux).

La réunion a pris fin à 14h25.

Annex 3: Report on the IA- RTE workshop on Transition

INTER-AGENCY REAL-TIME EVALUATION OF THE HUMANITARIAN RESPONSE TO THE HAITI EARTHQUAKE, PHASE 2 WORKSHOP

FOCUSING ON TRANSITION IN THE CURRENT CONTEXT OF HAITI: BRIDGING THE GAP BETWEEN HUMANITARIAN RESPONSE AND RECONSTRUCTION, AND LINKING RELIEF EFFORTS TO DEVELOPMENT IN TIMES OF CHANGE

September 27th, 2011
Port-au-Prince, Haïti

INTRODUCTION

The Inter-Agency Standing Committee (IASC) launched in August 2011 the second phase of the Inter-Agency Real-Time Evaluation (IA RTE) for Haiti to assess the disaster response, inform decision-makers, draw lessons and allow corrections to be made, where necessary, in real time. The main objectives of this second phase of the IA RTE were to:

▪ Analyze and provide lessons for the ongoing response, with a particular focus on coordination between different actors involved;

▪ Examine options for linking humanitarian response structures with longer-term and/or Government-established mechanisms; and

▪ Analyze the extent to which the findings and recommendations from the first phase of the Inter-Agency Real-Time Evaluation have informed the evolving humanitarian response in Haiti.

Field visits to Port-au-Prince and Leogane to gather information and evidence on issued described in the ToR took place over a 3-week period. As per the ToR, a workshop has been held on September 27th, 2011 in order to cross-validate findings.

OBJECTIVES

The purpose of the workshop was to present and discuss findings and potential recommendations to key stakeholders and engage them in validating and discussing an array of recommendations for concerted action. The workshop sought to prompt a utilization-focused approach and provide working groups with issues in bullet point form to generate discussion and foster ownership.

The specific objectives were to :
1. Enhance the understanding among key actors of transition issues in the current context of Haiti, including challenges, opportunities and good practices.
2. Review key issues in Haiti affecting the response, recovery, and the transition to development in often overlapping key areas[90].

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[90] These include the areas covered by the RTE, its preliminary findings, conclusions and recommendations.

PARTICIPANTS

Attendees included key stakeholders in the response such as representatives from the Government of Haiti at various levels, United Nations agencies, local and international NGOs, international organizations and donors. The participants included persons interviewed during the initial field phase of the RTE.

METHODOLOGY

An initial presentation by the RTE focused on five key areas :

- Achievements, coverage, gaps –including strengthened DRR - and critical factors affecting the response;

- Coordination mechanisms, platforms, connectedness and existing strategies, plans and funding instruments;

- Clusters, cluster transition and effective government capacity-building considerations;

- Sustainability of services, coverage of remaining humanitarian needs and challenges, including resettlement, funding and capacities;

- Communication, advocacy, engaging Haitians in the response, attention to protection and other cross-cutting issues.

Working groups were formed for each issue. Following the opening session, the evaluation team distributed to the participants a summary matrix of findings and potential recommendations related to the five key areas. The attendees were invited to form heterogeneous groups to discuss and potentially validate the content of the matrix. Each group had first to brainstorm on the findings and then on the recommendations and their operationalisation. The workshop concluded with a plenary session with the presentations done by the break-out groups.

COMMENTS & RECOMMENDATIONS

Several common concerns emerged from the break-out groups who first presented their comments on the findings :

- Findings should be better referenced.[91] Data on specific issues should be included in order to help understand the findings.

- The evaluation does not acknowledge enough what has been accomplished against great odds (for instance the cholera epidemic, the absence of Government and coordination mechanisms, poverty in Haïti, etc.) [92]

- It is often not clear whether the evaluation team is referring to the period starting in May 2010 or to a different one. The evaluation does not highlight a time continuum which might help measure change. It needs to be acknowledged in the report that the environment had improved greatly since the last RTE.

- RTE usually tries to offer different possibilities as to what could have been done another way prior to criticizing existing initiatives.

- A coherent overview of the context within which the IA RTE took place is missing.

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[91] The evaluation team had not referenced findings in the context of a matrix and this exercise.

[92] The matrices focused to a greater extent on areas requiring improvement.

- In this RTE, there seems to be very little new findings compared to the first one. Key findings often lack depth. Some participants were expected specific and pertinent examples, which could have illustrated the case better. Furthermore, the analysis remains superficial. There is too much generalization.
- There could have been better assessment in some cases taking into account issues such as disability, gender, DRR, age. Disability and ageing are not really on the agenda. There is no subcluster for elderly, for people with disabilities and other vulnerable groups while there is a cluster GBV, child protection.
- Element of DRR was not carefully considered.
- By definition, cash for work is used to alleviate poverty. It is just a strategy to put money in the hand of the people after a natural disaster or a crisis. Humanitarian intervention is not intended to be sustainable.
- Participants question the statement regarding humanitarian actors who only worked in camps. They rejected this statement because many of them have worked in communities before the earthquake. They have worked in Haiti where there were no camps. They recognize the need to work in communities more than in the camps and they have started to do that. For example, the same NGO's worked throughout the country.
- Funding dries up after emergency, which is also related to global recession. Humanitarian actors have no control over external factors.
- The humanitarian actors should focus more on local capacities and not only on national capacities, which by the way also includes the civil society.
- The evaluation team opinion should be separated out from evidence-based findings. Furthermore, there is also a need to clearly distinguish individual perceptions from a clear trend from respondents. There are very strong statements made but no explanations regarding those statements. Therefore they should be omitted.

The working groups concluded with a set of general and specific comments on key recommendations :
- Recommendations made by the evaluation team are not necessarily very useful. The RTE should provide concrete and actionable recommendations to guide and direct current efforts. It should focus on exploring options to adapt clusters to both align and support government-led coordination mechanisms.
- The link between findings and recommendations is sometimes missing. It should be straightforward. Making the link will help understand the logic behind each recommendation.
- OCHA should rise cross cutting issues, making sure that they are integrated in CAP projects.
- OCHA needs to interact more with grassroots actors and listen more to their needs.
- Give a voice to all actors, especially to the communities and not only to the camps.
- Include Youth in the communication agenda, civil society and Universities in the debate about transition.
- Open the participation of the population in decision making processes.
- Put people first in the communication process and information sharing.
- Implement the accountability framework.
- Mainstream accountability toward the affected population.
- Cash for work model could be used to encourage more durable activities.

- Transform Cash For Work into Work For Cash.
- What mechanisms are in place to integrate the concept of transition? What are the concepts of transition?
- It is true that a housing policy should have been included at the beginning of the humanitarian response.
- Improve the capacity of the government to communicate. Maybe UNDP could also play a role.
- The government designs a national strategy based on their citizen's consensus, which could conduct to a decentralized strategy.
- It is not easy to find specialists, qualified human resources and this situation is even worse for NGOs with limited budget. Therefore, only the UN and not the NGO's can hire more Haitian at a higher lever and put them into strategic position.
- There is a need to reinforce the leadership of local authorities, by getting them involved in the whole process.
- Joint assessment of local needs and capacities should be considered in order to fix priorities.
- An exchange platform between the Haitian authorities and the local organizations could be implemented.
- In the humanitarian response, a community approach based on neighbors should be prioritized.
- It is too early to talk about only development activities. There are still many vulnerable groups living in camps. Therefore, the exit strategy should take them into account by providing services during the transition period.
- Improving articulation between CAP, ISF and IHRC is indeed a must. But the RTE should provide more explanations on how to make it more effective.
- The evaluation should include a proper cost effectiveness analysis of the available resources.

CONCLUSIONS

Since the workshop included humanitarian and development actors, it created an opportunity for joint assessment of recommendations and planning. The results will be used to further cross-validate findings. The evaluation team should analyze the inputs of the working groups. The content emerging from those discussions should guide the team work during the elaboration of the report.

ÉVALUATION INTER AGENCES EN TEMPS RÉEL DE L'INTERVENTION HUMANITAIRE EN HAÏTI SUITE AU SÉISME, PHASE II
ATELIER DU 27 SEPTEMBRE 2011
PROGRAMME

9h00 – 9h15   :   Arrivée des participants
9h15 – 9h30   :   Présentation des objectifs de l'évaluation, de la méthodologie
                                            et des principales constations

Silvia Hidalgo et Marie Pascale Théodate
 9h30 – 9h35   :   Constitution des groupes
 9h35 – 11h10   :   Travail en atelier sur les constations
11h10 – 11h15   :   Propos de bienvenue

Nigel Fischer, Coordonnateur Résident et Humanitaire du
Système des Nations Unies
11h15 – 11h30   :   Pause-café
11h30 – 12h30   :   Présentation des résultats des ateliers sur les constatations
12h30 – 12h45   :   Questions et Réponses
12h45 – 13h45   :   Déjeuner
13h45 – 15h15   :   Travail en atelier sur les recommandations et un plan
                                            opérationnel
15h15 – 16h15   :   Présentation des résultats des ateliers sur les constatations
16h15 – 16h35   :   Questions et Réponses
16h35 – 16h45   :   Présentation des prochaines étapes
16h45 – 16h50   :   Mots de remerciement

Philippe Verstraeten, Chef de Bureau de OCHA

Annex 4: Transition strategies of clusters IN Haiti and options for linking/merging them into official structures

I. Introduction

1. This note on cluster transition has been prepared for managers in the field in advance of the full IASC RTE Haiti Phase II evaluation report. As the primary purpose of an RTE is to provide feedback in real time to those executing and managing the humanitarian response, this paper seeks to provide (1) a background to the cluster approach in Haiti[93] and concept of transition, (2) an overview of ongoing cluster transition efforts and explore the range of options (3) inform the current process. Evaluators recognize that efforts are underway and that managers in Haiti will often have a better understanding of both prospects and challenges.[94] This note simply intends to shed light on the wider range of different options and considerations and respond to many of the comments provided by stakeholders during the RTE workshop held in September in Port-au-Prince.

2. While discussions on the transition of clusters initiated in August 2010, these were very much disrupted and set back by the cholera response. In March 2011, over a year after the earthquake, concerted efforts were made to consider and plan for cluster transition in Haiti. A document on the status of cluster adaptation was drafted on March 22nd 2011 by the inter-cluster (OCHA). That same month, UNICEF held a workshop on cluster transition strategies for those clusters and the sub-cluster it leads.[95] Consultation ensued between the HC and initially cluster coordinators[96] and then was enlarged to also include cluster lead agencies under the HCT umbrella. A concerted approach is underway to have an overall plan for cluster transition in which there is recognition that there is no "one size fits all approach" and individual clusters are to define their strategy by November 11th 2011.

3. This process is taking place against the backdrop of decreased funding and amidst concerns regarding overall aid coordination and more specifically that of development aid.[97] There is an opportunity for reassessing capacities against needs and rationalizing the coordination apparatus. One example has been the merger of the shelter and CCCM clusters. This has been done in an attempt to rationalize the coordination framework, avoid compartmentalization and adapt to the decreased level of funding available. At the same time in addition to the initial coordination hubs in earthquake affected areas, important cluster decentralization efforts have been underway to strengthen coordination at the

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[93]The cluster approach aims to ensure a more coherent and effective response by mobilizing groups of agencies, organizations and NGOs to respond in a strategic manner across all key sectors or areas of activity.

[94]The assessment is time-limited and takes into account the views of individuals and organizations consulted, observations in the context of meetings attended and a more extensive desk review. Not all stakeholders were necessarily able to contribute to the process. Insights do not encapsulate all views or specificities of different sectors and an assessment of how clusters have evolved. Also, as this analysis reflects on a point in time in a fast evolving process of cluster transition, findings and conclusions may have been surpassed by events or may have been incorporated. Indeed at the time of the workshop held in Port-au-Prince preliminary findings and recommendations had not factored in progress that had taken place a week before.

[95] The Humanitarian Coordinator and OCHA participated in the workshop "*Stratégie de Transition des clusters humanitaires a une coordination nationale de l'aideau niveau sectorial et intersectoriel pour les clusters pour lesquels l'UNICEF assure le role de chef de file en Haiti.*" 28-29 March 2011 March Workshop Draft 0.

[96] In interviews the problem of solely relying on cluster coordinators for input on transition was raised as coordinators may be biased or have a conflict of interest feeling the need to extend their role and position.

[97]The ECOSOC July 2011 report underlines that aid coordination was a major challenge and that "almost all of the interlocutors of the Group held the view that aid is still not sufficiently coordinated, which creates duplication and reduces the effectiveness of interventions … [and that] development aid activities, … are often criticized for being dispersed."http://daccess-dds-ny.un.org/doc/UNDOC/GEN/N11/416/76/PDF/N1141676.pdf?OpenElement

local level and support the key role of mayors in coordinating and responding to needs. Coordination has been effectively decentralised in certain areas and for certain sectors through a Sub Hub system and following an integrated approach in certain cases. (e.g. meetings chaired by the municipalities of Croix des Bouquets and Tabarre).

II. Background to the Cluster Approach in Haiti and Transition

4.   When considering clusters in Haiti and transition, the evaluation has sought to ascertain both the need for transition and what this would entail. Questions that emerged had to do with what is to be transitioned and to whom and the components of transition. These issues often led to discussions on remaining acute humanitarian needs, what has been the purpose and value of clusters at this stage, OCHA's and to a lesser extent the IHRC (Interim Haiti Recovery Commission) and UNDP/BCPR's potential roles.

II.1 Coordination and the cluster system in Haiti

5.   In January 2010 in the aftermath of the earthquake, the Humanitarian Country Team agreed to the establishment of twelve clusters and 2 sub-clusters: Camp Coordination and Camp Management (led by IOM); Education (UNICEF/Save the Children); Emergency Shelter and Non-Food Items IFRC, then handed over to UN-Habitat in August 2010); Food Aid (WFP); Logistics (WFP); Nutrition (UNICEF); Protection (OHCHR, UNICEF for Child Protection and UNFPA for GBV); WASH (UNICEF); Agriculture (FAO) and Food Aid(WFP); Early Recovery (UNDP); Emergency Telecommunications(WFP); and Health (WHO). The Government, to the extent possible appointed Ministry counterparts to co-lead each cluster, and by May 2010 had intensified its involvement with clusters in response planning and implementation at all levels. Coordination capacity was established in Port-au-Prince, Léogâne, Petite Goave, Jacmel and Gonaives.The Interim Haiti Recovery Commission (IHRC) was established in April 2010.

6.   The cluster approach was first introduced in Haiti in early 2008 and evaluated at the end of 2009 (see Binder and Grunewald, IASC cluster approach evaluation, 2nd phase Haiti country study, April 2010). The assessment found that the main coordination challenge was at the time "not necessarily a lack of coordination, but an abundance of parallel and sometimes dysfunctional coordination mechanisms".[98] At the end of 2009, before the earthquake no formal decision had been taken on the clusters and these were still officially in place and had not officially been deactivated even after the Hurricane season. Prior to the earthquake, significant effort had been made to improve existing disaster coordination – investing in the System National de Gestion des Risques et des Desastres (SNGRD) - a permanent secretariat coordinating 26 governmental and non-governmental organisations and the Direction Nationale de la Protection Civile (DPC), in charge of national, regional and communal operations and coordination. Within the SNGRD, the Haitian government established a *Groupe d'Appui de la Coopération Internationale* (GACI) bringing together donors, UN agencies, MINUSTAH, and international NGOs and the IFRC and the Haitian Red Cross. The GACI's role was to coordinate preparedness activities and, during an emergency response, mobilise funds and organise technical cooperation. Within the GACI, the Comite Permanent Inter-Organisation (CPIO), established in 2008, represented the humanitarian community and included the UN and 9 INGOs, and the Haitian Red Cross/ IFRC.

7.   Haiti's longer-standing aid coordination set-up has relied on sectorial tables at the level of

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[98]Binder & Grunewald, IASC cluster approach evaluation, 2nd phase Haiti country study, April 2010, p. 16.

Ministries. Their level of effectiveness in the past varied greatly. The most recognised sectorial table is the one for Agriculture (relaunched in December 2008) but where NGOs have been traditionally unable to participate at the national level. Multi-stakeholder meetings take place monthly in each of Haiti's 10 departments.[99] Post earthquake, in addition to the clusters and *tables sectorielles* functioning to varying degrees depending on the sector, the IHRC set up adhoc working groups for certain sectors as of October 2010. The Recovery Commission (IHRC) has itself foreseen strengthening the links between the tables sectorielles and the G-12 group of development donors but with limited contact with the cluster system.[100] Other initiatives such as the CGI supported Haiti Action Group,[101] which was set up before the earthquake, also provide a framework for sectorial coordination of efforts (see Table 1).

8.   Clusters, to varying degrees, have undeniably developed capacity and knowledge. The main clusters have carried out gap analyses, defined guidelines, standard operating procedures and strategies. Contingency and preparedness plans have been developed. Most importantly, the clusters have established tools for information management and important lessons learned. Specific benchmarks for assessing the performance of cluster and inter-cluster coordination have however not been established in Haiti. There are now different perspectives on the value and usefulness of clusters depending on the cluster, the actor interviewed and the stage of the response. Despite existing differences in views, there is overall a consensus on the importance of the framework for coordination and of the past strengths and weaknesses of the cluster approach in Haiti. Cluster coordinators were for the most part considered qualified, with the right skills, and sufficient leadership and potential to fulfil their role. Sustaining the coordination mechanism and transitioning it requires renewed investment. The level of Human Resources in the humanitarian operation, at this stage –in terms of the quality of the personnel involved and their knowledge of the context-, was generally viewed as high.[102]

9.   Cluster Transition Planning

Timeline

Post 2008 Hurricane season	12 January Earthquake	*official end of relief phase*	Cholera outbreak	Elections Hurricane Thomas	President Martelly elected	Negotiations to form a government	
December 2009	January 2010	June 2010	October 2010	November 2010	March 2011	September 2011	November 2011
Clusters from 2008 still in place but dormant	Earthquake response Cluster roll-out	Discussion on transition			Adaptation Plan Unicef driven workshop	Cluster Coordinator/ Cluster Lead Planning	

Sources: *various*, OCHA Adhoc HCT Presentation on Cluster Evolution (September 2010) , GPPi - URD Haiti Case Study on Clusters (April 2010)

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[99] www.agriculture.gouv.ht.

[100] Terms of reference for position of technical adviser to support aid coordination within the IHRC and between the ministries, sectoral tables and the G12 do not mention the clusters. (ref. UNDP jobs April 2011).

[101] Led by Denis O'Brien, head of the Haiti Action Network, network members meet monthly to report on and discuss issues and challenges in achieving their objectives in working groups in education, energy, enterprise, environment, health, sanitation, shelter, and nurturing Haiti's deep culture.

[102] Interviews, observation. Personnel engaged in the response in key positions is for the most part experienced, French-speaking and has been present in country for over 6 months.

10.   Table 1: Sectoral Coordination: Clusters and other coordination initiatives.

Global clusters	Clusters activated in Haiti (2010-2011)	GoH cluster co-lead or counterpart	CIRH Objective/ expertise	Haiti Action Network group
Agriculture **FAO**	Agriculture FAO	MoA / Table		
Early Recovery **UNDP**	Early Recovery **UNDP**		**Recovery**	
	Debris- working group	MTPTC	**Debris**	**x**
	Livelihoods- working group		**Job creation**	**x**
	Logement Quartier- working group under shelter and since September under ER	Mairies Future housing authority (HA)	**Shelter**	**Shelter WASH**
Education **UNICEF /SCF**	Education **UNICEF /SCF**	MoE	Education	X
Emergency Shelter **IFRC**	Shelter **IFRC UN Habitat**	Mairies & HA	Housing	X
ETC **OCHA/WFP/UNICEF**	ETC **WFP**	-		
Food Security **FAO/WFP** (as of April 2011)	Food Aid **WFP** *unofficial phase out*	MoA CNSA		
Logistics **WFP**	Logistics WFP	DPC		
CCCM **UNHCR/IOM**	CCCM **IOM (merged with shelter since September 2011)**	DPC and Mairies	Housing	(shelter)
Protection **UNHCR** **SUB-CLUSTERS** **Child Protection UNICEF** **GBV UNFPA** **RoL/Justice UNDP/OHCHR** **Housing/Land/Property UN Habitat** **Mine Action UNMAS**	Protection **OHCHR/ MINUSTAH** **SUB-CLUSTERS** **Child Protection UNICEF** **GBV UNFPA**	IBRS MCF		
Health **WHO**	Health **WHO**	MoH	Health	X
Nutrition **UNICEF**	Nutrition **UNICEF**	MoH		
WASH **UNICEF**	WASH **UNICEF**	DINEPA	Water & Hygiene	X
Cross-cutting issues HIV/AIDS **UNAIDS** Gender **UNFPA** Environment **UNEP** Age **Help Age International** **Disaster Risk Reduction**			Gender DRR… Environment	*Culture Energy*

Source: Various

Table 2: IHRC: 11 Planned Sectoral Tables[103]

Planned Sector tables/coordinating entities - IHRC Strategy for Supporting and Reinforcing the Capacity of Haitian Institutions (December 2010)			
Sector	**Government Chair**	**Sector**	**Government Chair**
Housing	MAST, as chair of the inter-ministerial commission on Housing	Water, sanitation and hygiene	DINEPA
Debris removal	MTPTC	Rule of law	MSPJ
Agriculture and environment	MARNDR and MOE	Risk reduction and management	MICT
Food security	CNSA	Institutional building and decentralization	MPCE and MEF
Health and nutrition	MSPP	Infrastructure	MTPTC
Education	MENFP		

11.   National participation and ownership as principles guiding the cluster approach are viewed as key for transition. OCHA's RTE (December 2010) also found that the interface between clusters and government-led coordination mechanisms had in most sectors been weak and that there had been little guidance on how the two relate to each other and ensure coherence between humanitarian response and recovery/development work.[104] As mechanisms and practices are put in place, it is difficult to adapt dynamics and turn the tide of weak initial Haitian ownership of the clusters. Limited ownership of the cluster system is cited in many crises. In Haiti, many different reasons are provided to explain limited national participation and not all are seen as negative.[105]

12.   The Strategic Plan for the Remainder of the IHRC's Mandate (December 2010) recognised coordination as a major challenge in both the humanitarian and development efforts. It further identified that lack of coordination was often a result of lack of leadership, or lack of recognized leadership and called on all concerned ministries or Haitian entities to be involved in all stages of all major humanitarian or development efforts. While recognising that prior to the earthquake, sector tables had been put in place with mixed results, it argues in favour of humanitarian clusters ultimately folding into sector tables to create a platform for the wider recovery effort. The need for moving away from "a multitude of silo coordinating mechanisms that have only superficial links with each other and

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[103]The Commission's mandate is set to expire in October 2011. The main goal of one of the seven objectives of the CIRH – capacity building for coordination- has not been targeted by projects. After growing pains implementers now claim that the IHRC is at the point where one would have wanted it be over a year ago. Capacity building in the context of resigning Ministers and in absence of a new government has also been a constraint.

[104]Bhattacharjee, Abhijit and Lossio, Roberta, Evaluation of OCHA Response to the Haiti Earthquake, Final Report, January 2011.

[105] *Interviews.* In the case of the Food Aid cluster the GoH preferred not to have to use its overstretched capacity on NGO coordination and be present in meetings. In other instances, government representatives in meetings feel that they are put on the spot and lack decision-making capacity or means.

the governmental" is underlined and for government in the short term to lead existing mechanisms (humanitarian clusters and sector tables).

13.   The IHRC strategy further emphasises the need for further rationalisation of coordination structures in line with capacity constraints and to avoid excessive compartmentalisation and for sectorial tables to be reinforced with a broader composition and more ambitious mandate than before the earthquake. (see Table 2)

14.   An important investment has been made on the part of actors in terms of time of human resources. Actors in Haiti will also appreciate how time consuming going to meetings becomes. If one follows guidelines for cluster coordinators and these have to remain distinct from programme staff, managing clusters becomes a real investment and costly exercise.[106] Beyond the initial coordinating and information-sharing role that clusters have played, strategies, standard operating frameworks and procedures and guidelines have been created in key sectors.

II.2   Understanding transition

Although actors interpret the term "transition" and what it encompasses differently, it is widely equated with a situation that is generally improving**. '**Transition' refers to the period between the immediate aftermath of crisis and the restoration of pre-crisis conditions (recovery), or their improvement to a satisfactory level (development).[107] Transitions are also understood as periods "when intensified efforts of capacity building are needed and where partnerships of the international community are most crucial for supporting efforts to overcome adverse situations, and create conditions for stability, human security, governance and protection of human rights."[108] Capacity building[109] can be defined as a process whereby people, organisations and the international humanitarian community as a whole unleash, strengthen, create and maintain capacity to identify and meet humanitarian needs in a timely, efficient and effective manner. This involves the individual, organisational and systemic level.

15.   There is some confusion on the timing of transition, when actors should start focusing on it and specifically how the pace of recovery and reconstruction affects transition. Cluster transition is also often a result of decreased funding. While this was not the only reason for the merger between the CCCM and shelter/NFI clusters, UN Habitat was unable to secure funding for its continued coordinating role.

16.   Understanding of what has to be transitioned varied between what was felt would entail essentially handing over information "a USB drive before leaving to a designated actor" to comprehensive capacity building efforts pursued at the normative and policy level, institutional level and individual level. The latter often felt that humanitarians essentially exit when the context improves. The notion of how far humanitarian efforts should go in terms of strengthening capacities –even the role

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[106]UNICEF that together with the child protection sub-cluster manages a fourth of cluster efforts. The cost of cluster coordination for UNICEF in Haiti was estimated at 12 million USD NEED TO CHECK WITH UNICEF AS THEY RECENTLY TALKED ABOUT 9 m INSTEAD FOR THE SAME PERIOD for 2 years.

[107]For operational purposes, OCHA defines "transition" as the phase of a humanitarian crisis in which acute vulnerability begins to decline, leading to a reduction in international life-saving assistance and an increase in early recovery, recovery and rehabilitation activities." See OCHA on Message: Transition http://ochanet.unocha.org/p/Documents/OOM_Transition_English.pdf

[108] See Who Towards A Framework For Health Recovery in Transition Situations Global Consultation on Health Recovery In Transition Situations, Montreux, Switzerland 4-6 December 2007

[109] OECD DAC definition 2006.

altogether- was also publicly questioned in so far as funding was not available and the humanitarian community could only focus on responding to residual acute humanitarian needs.[110]

17.   Transition is very much a part of OCHA's mandate that recognizes that humanitarian response should be undertaken in a way that supports recovery activities.[111] Groundwork for a successful transition starts well before the transition phase begins.

18.   In terms of understanding the components of and planning transition, the evaluation found that few actors that had left and phased-out their activity in Haiti were able to develop more comprehensive transition plans that would consider elements of the following:

- Purpose and objectives
- Strategies
- Guidelines
- Processes
- Key components
- Schedules

- Key indicators
- Major outputs
- Resource requirements
- Funding
- Budgets
- Staff requirements

Interviews showed that the lack of prospects for receiving funding for transition acts as a disincentive for organisations to prepare these comprehensive plans.

19.   At the global level, guidance for cluster transition and exit strategies includes among others focusing on:

a. Supporting transition process by reinforcing longer-term coordination and collaboration mechanisms (sector working groups etc.)
b. Supporting preparedness strengthening of sector groups, Government and National organizations
c. Reviewing longer-term donor agency priorities and expectations
d. Transitional awareness, capacity building of national agency personnel
e. Confirming linkages between activities of major partners in the field
f. Considering long-term agency consortium possibilities.[112]

20.   The transfer of coordination activities to national authorities and development actors requires assessing services against ongoing and expected coordination needs and the capacities of various actors. In certain key areas like Camp Coordination and Camp Management (CCCM), despite ongoing needs,[113] the number of partners has rapidly declined which creates a different set of challenges in this phase and a need for further rationalisation of coordination structures. Clusters have to deal with the departure of actors and the phasing out of assistance (e.g. Wash, health and camp coordination).

II.3   Limitations and constraints

21.   In Haiti, elections, changes in leadership and months without a government have acted as a constraint. These critical factors, in addition to the outbreak of cholera, have affected transition

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[110] ERC response to question in CAP workshop September 2011.
[111] See OCHA 's Role in Transition, June 2010.
[112] Food Security Cluster Inception Meeting, Rome 30 - 31 May 2011
[113] 550 560 persons remained in camps in September 2011 as per the Displacement Tracking Matrix.

planning. Haiti's environment is admittedly complex, and there are many simultaneous needs to consider, with limited funding, capacity, and time. The most complex challenge in the strategic process may be prioritization and sequencing.[114] Clusters do not help prioritise response across sectors. Another limitation is that the CAP in the context of Haiti has to prioritise responding to acute needs over recovery and including more elements of transition.

22.   As transition planning should aim to support national objectives, strengthen the lead role of Haitian institutions and complement longer-term planning of development actors, limited clarity at some levels and stages with respect to government priorities and counterparts has been a serious limitation. In addition, the lack of space for joint assessment and planning between humanitarian and development actors has weakened potential links between clusters and longer-term sector groups. Uncertainty with respect to the renewal of the IHRC whose mandate was set to expire in October 2011 has created an additional fragility.

23.   Another limitation for transitioning cluster coordination is that clusters (and cluster hubs), despite cholera and preparedness for the hurricane season, are viewed as focusing on more on earthquake affected areas (i.e. where OCHA is present). Establishing links with a system that is to effectively address overall coordination needs at the national, departmental and communal and local levels is all the more challenging.

24.   The lack of a government counterpart for a given cluster is also seen as a major constraint for transition. This is especially the case for the Protection cluster. This challenge is not unique to Haiti.

25.   A further aim of the cluster approach, which is important for transition, is to increase ownership and connectedness of humanitarian response by building on local capacities, ensuring appropriate links, coordination and information exchange with national and local authorities, state institutions and civil society organizations. Strong ownership and connectedness facilitate the transition from relief to development and ensure that the achievements of humanitarian actors can be sustained. It is however in this area that the cluster approach has been considered tenuous in Haiti. The cluster system suffers from the difficult to rectify initial lack of inclusiveness of Haitian actors.[115] Despite efforts, the clusters suffer from a stigmatization and a mechanism that has limited Haitian ownership. [116] Involvement of Haitian NGOs has been largely unsuccessful.[117]

26.   The IHRC has suffered from weak ownership and capacity issues. It has had limited relations with humanitarian actors and the clusters. These factors in addition to its limited mandate and uncertain future have not favoured a process where clusters could merge with, phase-out or hand-over some of its functions to the Commission and its priority areas.

Actors in Haiti have recommended distinguishing between longer-term disaster risk reduction and short-term preparedness and response when considering cluster transition. The cluster evaluation Phase II already emphasized the need for developing guidance for clusters in contexts like Haiti where disasters

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[114]Prioritization and sequencing were voiced as a key isue where former PM Bellerive in October 2010 indicated the GoH needed far more guidance and support as sectors and Ministries were individually developing their plans.

[115]Key to transition is the role of the government and the emphasis on "partnerships" with local actors. Capacity issues, the top-down cluster roll-out dynamic and the nature of cluster meetings often position the UN as the "lead" in humanitarian response.

[116] The focus group held on 30 August 2011 with Haitian National staff working in the aid effort signaled national capacity building as one of the major weaknesses of the humanitarian response. In the transition phase, national staff expected to play a stranger role but have seen that key positions are still held by expatriates.

[117] See Hedlund, Kerren, Strength in Numbers: A Review of NGO Coordination (ICVA case study in Haiti 2010), provides an account of the problems faced with local NGO involvement.

are reoccurring. It should be mentioned that the specific constraints and lack of flexibility with respect to Human Resources within the UN in particular are a disincentive to adapting resources to actual needs and scaling down. Country managers interviewed explained just how much of a disincentive there was to reduce personnel, including those supporting cluster coordination, knowing how difficult and lengthy a process it is to recruit or recover personnel when you were not sure if you would have a new crisis like the cholera outbreak and need them in three months time.

27.   External assessments of the clusters in Haiti have found that the system is compartmentalized and that there is room for increasingly merging sectors of activity. The fact that there are more different defined agencies acting as leads, in clusters, which could be merged, does not help rationalize the system. There is also a tendency to retain certain areas of activity to access funding. The IHRC in its strategy identified for example one sector table for both Nutrition and Health that has different cluster leads. In Uganda, at the national level, the CCCM sub cluster and Protection cluster meetings were merged but these were led both led by UNHCR.

28.   Inter-cluster coordination has been regarded as weak in Haiti and this has limited working on multi-dimensional and crosscutting issues and addressing transition challenges in a more concerted way. The main objectives of a transition plan have yet to be defined and the HCT has not yet been an effective forum to develop strategy and the operational plan for transition. There has been some recent progress with additional direction from OCHA and a presentation at an adhoc HCT meeting in September 2011 where a deadline has been defined for establishing a tentative plan on cluster transition.

II.4   Timing of transition

29.   There is recognition of the importance of planning early for transition and recovery. This includes defining criteria for when and under what circumstances the cluster will close down and hand over to another entity. Clusters in Haiti were not able to cover this as part of their strategic planning when they were set up. Ideally criteria for phasing out or handing over should be defined and cluster members and the group should monitor throughout whether the criteria are being met. Clusters have not defined focal points within their group that would work on transition and recovery and define an operational plan. Much progress has recently been made with this effort to define a plan for cluster transition by November 2011. Through further Inter-cluster coordination, additional benchmarks and triggers for phasing out and handing over activities can be defined.

30.   **Box 1 Questions for cluster transition**
As guidance, questions have been identified at a global level to help inform the criteria for handover and phase-out:

- Has the coordination mechanism achieved its objectives according to its terms of reference?
- When the coordination mechanism disbands, are there significant issues or activities that still require attention?
- Is there sufficient capacity to ensure a coordinated approach to recovery when the cluster disbands? Is there a continued need for coordination through the cluster approach?
- Is there an appropriate national authority to which the coordination role can be transferred? What is its capacity to undertake this, and what support do national authorities need in the handover phase, e.g. on crosscutting issues?

In *Lifespan of Clusters, Cluster Wise, J.* Sheperd-Baron[118] suggests the following questions:

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[118]James Shepherd-Barron, Lifespan of Clusters, Cluster Wise , *clustercoordination.org*

- Do the circumstances of the wider relief effort justify a merger, a modification, or a phase out?
- Cluster objectives as described the cluster strategy/strategic framework in terms of meeting relief needs have been met (note 'goods in the pipeline' does not fulfil this criteria)
- Are there any Inter-Cluster or crosscutting issues or activities that might be left unattended?
- Capacities of the government or development agency to whom responsibility is being handed over are sufficient
- Are Government authorities in agreement?
- No related Cluster objects i.e. their programmes won't be jeopardized by premature hand-over.
- Has due consideration been given to the prospect handing over to national or local authorities?
- Do any of the Cluster members or members of the Inter-Cluster group object?

31.   In Haiti the government had initially officially defined July 2010 as the cut-off date ending the humanitarian relief phase for the earthquake response (i.e. unrelated to the cholera effort and Hurricane Thomas). Similar deadlines have been established in other post-disaster contexts such as the Pakistan 2005 earthquake. Following the immediate relief effort after the earthquake in Pakistan in 2005, the Pakistan governmentset a date of 31 March 2006 as 'the end of relief' and the beginning of a shift into recovery and development. Food aid programmes were later nonetheless extended to September 2010 before elections. The move phased out food aid and food aid cluster coordination. In Pakistan, the six month cut off date was later seen as a useful way of helping to switch mind sets from short-term to longer-term thinking.[119]

32.   Many agencies in the field[120] felt that it was entirely too early to consider phasing out humanitarian activity and its coordination given current indicators and the level of fragility of the context (vulnerability to disasters, cholera and weakness of national means and institutions). The problem of equating the end of the humanitarian phase with the end of a cluster coordination mechanism was raised.[121]

33.   Actors who implement integrated approaches advocated for an earlier merging of clusters because they feel that separate sectors curtail organized thinking and local action in the response.

III.1   Approach and options considered

34.   Clusters and cluster transition efforts in Haiti have focused on the co-lead role of the GoH and the concept of *tables sectorielles* (sectorial tables). In the context of a changing government, further engaging ministries has been a challenge. Sectoral tables in most cases also suffer from negative stigma and the IHRC Project for their strengthening has not gotten off the ground. Development donor aid will increasingly return to being bilateral in Haiti and the main donors will largely continue to work within the same sectors with their preferred partner counterparts (e.g. DINEPA, CNSA, etc.) unless there is a concerted programme that effectively takes off.

35.   When considering cluster transition, discussions in country have underlined that there is no "one

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[119]Cluster Working Group on Early Recovery in cooperation with the UNDG-ECHA Working Group on Transition, *Guidance note on* Early Recovery p.18.
[120]Approximately 80% of persons interviewed found that humanitarian assistance was being phased out too early due to lack of funding.
[121]The child protection global cluster on transition emphasizes that "the situation is much more complex than that!"

size fits all approach". The workshop organized by UNICEF in March 2011 had already identified that transition would come at different speeds and forms. While transfer to ministries and sectoral tables has been emphasized as the approach to be followed, intermediate options can be needed.

36.   In some cases, transitioning into Ministry-led sectoral tables can be the most logical option and clusters folding into these groups can add capacity and support a more coherent seamless response where the humanitarian issues, recovery and development can be addressed in parallel. This could imply both the Health and Nutrition clusters merging and folding into Health and Nutrition table. The institutional restructuring that is foreseen in Haiti has in certain areas added some uncertainty to the sustainability of some options.

37.   Beyond sectorial tables, the priority may be to have a single forum where sectoral issues are discussed. IASC Clusters Self-Assessment (2007) recognized that: "to the extent possible, depending on the context, discussions about relief and recovery and where possible development on a given issue (e.g. health) should be discussed in a single forum, with the aim of fostering more natural linkages between relief and development, minimizing meetings, and ensuring that development takes preparedness for emergencies into consideration."

38.   With the benefit of hindsight and examples from other crises, it appears that focusing on Ministries and sectoral tables is a too limited approach. There has been too much emphasis on a complete transfer to an "official structure". INGOs were also heavily advocating for support for secretariats of the sectoral tables and for donors to specifically provide financial support to integrated development and emergency funding that supports relevant Haitian government institutions. (see Shaye 2011).

39.   In addition to identifying a governmental counterpart and taking stock of the current state of the cluster, another way of considering the task of cluster transition ahead is to understand differences, with the following issues non-exhaustive in mind:

   a. to what extent are the demands for cluster and sector coordination the result of the earthquake and tied to a need created by the earthquake? (e.g. debris)
   b. was sectorial coordination an effort already in place before the earthquake? (e.g. agricultural table)
   c. was the need for cluster coordination temporary? (e.g. as with food aid, the cluster function primarily a need for liaising or coordinating with large number of actors present)
   d. A recognised need before the earthquake but not sufficiently covered? (e.g. nutrition)
   e. A need for covering a new area of response undertaken by the cluster? (e.g. sanitation)
   f. A need that can increase incrementally over time (e.g. protection)

40.   Much effort has gone into defining how the CCCM and shelter clusters could be merged and their links with other sectors. This has been very positive for assessing the implications and taking stock of needs for setoral coordination. There is a need to further re-rationalize the cluster approach around core themes that will help: better address remaining humanitarian challenges and mainly resettlement, link with other existing and new structures and avoid duplication of coordination mechanisms, some frustration with excess meetings. Clusters can contribute to stronger coordination and humanitarian objectives if they effectively address multi-dimensional issues and are able to present themselves as parts of a coherent framework. The establishment of a Housing Authority in Haiti is seen as a positive development on all fronts. Many clusters, including the protection cluster, will identify this new

structure as a clear government counterpart for many of their activities. It will be essential that there be a coordinated approach and that the cluster system be understood and not overwhelm the new government and Housing Authority. This would be better managed if there were additional integration of clusters around resettlement issues and renewed discussion on a resettlement strategy. The decrease in the number of actors and the renewed support for integrated approaches also favours additional integration. Less meetings and increased participation also tend to favour coherence, strategic discussion and increased decision-making.

41.   One donor agency in the field strongly recommended rationalising clusters now around the issue of displacement. The report compiled 6 months after the Earthquake at the request of the Principals of the Inter-Agency Standing Committee (IASC), also signalled that one area which required some additional thinking at the global level was identifying the most effective ways to coordinate on specific multi-sectorial challenges, such as the resettlement of IDPs in the Haiti context. It further concluded that these multi-sectorial issues, involving 3 to 4 key clusters, were not always effectively strategized and coordinated through existing inter-cluster coordination fora and that was "imperative to counteract the 'silo effect', whereby each cluster focuses solely on sector-specific activities, to the neglect of critical cross-cluster and multi-sectorial thematic areas of need."

42.   There is room for further adaptation of the cluster approach in the current context of Haiti through further reorganization and merging of clusters. There is a need to clarify the mandate and role of each cluster at this stage: Are clusters a coordination mechanism for an emergency situation or should clusters keep working on transition and recovery needs? Have recovery plans been established? What can be the links with the IHRC and can Cluster coordination and certain IHCR working groups be merged? How can clusters and ICC adapt to the need for stronger geographically based local and departmental coordination?

43.   Decentralised coordination can be more effective. The RTE working group on decentralised coordination emphasized that effective decentralization depends on partnership and involving decentralised actors at all stages (i.e. project definition, conception, implementation, etc.). The evaluation found that coordination at the local level could be hampered by a compartmentalised cluster approach. Sector-based coordination mechanisms like the clusters need to make room for stronger geographically based coordination. The role of the CMO and the DPC in support of mayors playing a lead role in municipalities like Croix des Bouquets is extremely positive. Local authorities do not always have an overview of the assistance planned in their area and need to be supported to take on a stronger coordination role across sectors. Information gathering and dissemination tools need to adapt to the needs of geographically based coordination.

44.   Just as there is recognition that global cluster leads can only "offer" services to the field and not impose anything on them, clusters at the field level should not necessarily seek to transfer their tools and working methods to long term Haitian structures. In some cases there was little consideration of what type of tools and systems can be viably handed-over and their level of suitability in the longer term. As suggested by the working group at the RTE workshop on cluster transition, information gathering and dissemination tools need to be further harmonized, strengthened and made more accessible. There may be a need to better understand the appropriateness of tools for national and local counterparts and incorporate notions of longer-term sustainability.

III.2   Objectives of cluster transition

45.   Evaluators did not find that the objectives of overall cluster transition and a concerted strategy had been defined. This may prove helpful when considering the suitability of options, defining priorities and selecting approaches (overall and for specific sectors). UNICEF, in its March 2011 workshop, did define axes and guiding principles for a transition from clusters towards other government led mechanisms that prioritise recovery and development efforts.

Box 2. Four main objectives of a cluster transition plan can be:

(1) To support a process in which **humanitarian coordination structures can be adjusted to meet the needs of longer-term recovery coordination** and **handover and transfer appropriate services and coordination activities to national authorities and development actors**, phasing out services no longer required, including **redressing potential imbalances** created by focus on disaster-affected areas

(2) To capitalise on the **existing knowledge** base within the clusters already obtained during the earthquake and cholera emergency response

(3) Consider a **system to address remaining acute vulnerability** through well-coordinated assistance efforts and work with national authorities and development actors in the affected country to **integrate humanitarian needs into social services networks and development frameworks**;

(4) To allow an **effective reactivation of the Cluster** should another "event occur over the ensuing years as more formal development projects start to take over from those of the humanitarian emergency and assist members of the in-country coordination system to **prepare for resurgent or new crises**.

IV.   Other possible options and considerations

46.   Participants in the September 2011 RTE workshop breakout group on cluster transition reported the need for additional guidance from the IASC at a global level, OCHA Headquarters, the UN Development Operations Coordination Office and BCPR on cluster transition: benchmark definition, examples of transition from other countries and their usefulness, specific advice on working in fragile states, lessons learned and good practice.[122] Evaluators have drawn examples of transition options followed in other countries. The merit and benefits of these options have to be assessed against the objectives of a strategy and the specificities of each sector.

i) Focusing not only on government

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[122]The need for HQ involvement in advocacy efforts for transitional funding was also raised. Evaluators found that funding is not only an issue in the "grey transitional area" but limited on the whole and that there has been little to no advocacy on funding the 2011 CAP.

In a number of other countries,[123] clusters transition to thematic groups that are not government-led. The WASH Cluster in Kyrgyzstan planned a hand over of the coordination role to two agencies (UNICEF and one International NGO) saving relevant data on the OCHA website and handing over the government liaison role for WASH to a local NGO.[124]

ii) Merging meetings in advance of transfer

In Uganda, at the national level, the CCCM sub cluster and Protection cluster meetings were merged.

iii) Handing over functions to other longer-term actors present in the country

In Cote d'Ivoire, Cluster coordinators and specific actors like the Information Management Unit developed a longer-term strategy and handed over functions to other longer-term actors (RC, UNDP, etc.)

iv) Retaining short-term partial responsibility

In Uganda, transferring full cluster responsibility for coordination to authorities was seen as a problem insofar as it was felt that the government should focus more on substantive thinking, building up its own delivery capacity rather than managing the work of NGOs. In this case, the task of coordinating NGOs and international actors can be carried out by the cluster lead agency for a longer period of time.

v) Foreseeing a specific transition fund

In other countries, transition funds can cover remaining humanitarian needs. In Cote d'Ivoire OCHA worked with the RCO to support the local transition fund to cover remaining humanitarian needs*.*

vi) Retaining humanitarian capacity

In the long term a Humanitarian Advisory Unit with key sectorial competence can be created and then integrated into the RC to support residual humanitarian needs, preparedness and early warning.

vii) **Systematically integrating humanitarian and recovery issues in long-standing sectorial meetings**

In Somalia, efforts to ensure that humanitarian and recovery issues were integrated into all sector work included the health sector meeting incorporating an agenda item on early recovery

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[123] Myanmar after Cyclone Nargis, Kyrgyzstan, etc.
[124] See WASH Cluster Transition Strategy for Kyrgyzstan
http://kg.humanitarianresponse.info/Portals/0/KeyDocuments/WASH/WASH_Cluster_Transition_Strategy.pdf

and an agenda item on humanitarian issues, but both are addressed within the same forum.

viii) Transitioning into a recovery coordination mechanism

In Myanmar, after Cyclone Nargis, clusters were replaced by a newly created coordination mechanism to support implementation of the plan for recovery (PONREPP). The mechanism developed was based on a sector-integrated approach with three Recovery Groups (basic services, livelihoods, physical and special protection), supported by four Recovery Hub Offices, replacing six OCHA coordination hubs.

ix) Building local capacity for future cluster roll-out

In Myanmar, cluster phase-out was accompanied by the development of contingency plans per cluster, which had been in the process of development before Cyclone Nargis hit. Local resources and additional capacities, such as training local NGOs so they would be able to implement a cluster approach in a new crisis, were included in each plan.

x) Involving national NGOs

The inclusion of national/local actors remains a significant challenge for clusters globally. In Myanmar, National NGOsin time became better involved in clusters. Envisaging a genuine role for a national NGO in a specific sector/cluster could be feasible, a means of fostering greater ownership for the cluster approach in a country faced by recurring disasters and an example to be followed.

xi) Participating in Recovery Plans

Clusters in Myanmar also participated in the definition of a three-year recovery plan.

xii) Strengthening the Recovery Cluster on the key humanitarian issue

In Uganda it was recommended that some form of 'transitional task-force' be established within the existing Early Recovery Cluster to provide oversight of the returns, rehabilitation, and transitional shelter activities. A full-time lead coordinator was required, with individual focal points established in all relevant Clusters.

xiii) Addressing continuing humanitarian coordination needs through a transitional mechanism

In Pakistan in 2006, there was continued need for coordinating residual relief to displaced populations, the focus for overall coordination of planning and implementation was shifted to a 'Transition Relief Cell', with a focus on coordinating early recovery, longer-term recovery and development.

xiv) Defining a strategy and modalities for cluster coordination co-led by an NGO and government before identifying the institutions

In Kyrgyzstan, the GBV sub cluster implemented a transition strategy and prepared the handover of GBV coordination to national stakeholders. The GBV sub cluster was to become "The GBV

Coordination Network" and be led by a local NGO and a relevant government structure. The two institutions were to be identified within 6 months and UNFPA, UNICEF and UNIFEM to provide technical support, as required, to the local stakeholders for GBV coordination for an additional 6-month period. The members of the GBV Coordination Network were to meet once a month in oblast level and once in two months at the national level.

xv) Renaming mechanism or coordination group

In Kyrgyzstan, as the name "Cluster" remains synonymous with formal OCHA activities after June 2011 the WASH Cluster was to be renamed WASH Sector.

xvi) Expanding the capacity of the RC/HC to better manage transition

In Nepal, an expanded Resident & Humanitarian Coordinator's Office (RCHCO) was established in August 2010 to support Nepal through its current period of transition and was expanded for two years. The RCHCO in its current, expanded form is intended as a temporary structure in response to the specific challenges of a transition situation, the high expectations on the RC/HC function in these periods, and the institutional flux that typically occurs in the UN during these phases.

V.   Main conclusions and recommendations

47.   A transition in a context of a major disaster, recurring crises and chronic poverty, from insecurity to relative stability, from humanitarian relief to development, is inherently complex: competing needs overlap and actors must adjust to new roles. Institutional confusion and weak leadership have affected Haiti's transition at certain stages both within the international response and in the national setting. OCHA has the capacity to forge more direct relations with GoH and civil society to play a stronger role in the transition phase. It needs to strengthen its direct connections with the GoH. In this transition context, OCHA can encourage strategic and operational coherence between humanitarian, recovery, reconstruction and development assistance and help address residual or potentially new humanitarian needs. The HCT could take on a more proactive role and further engage with the government and development counterparts to plan for cluster transition.

48.   The Cluster Approach in Haiti and in other contexts can be recognised for the role it plays maintaining a focus on humanitarian needs and the dire situation that continues to affect a significant proportion of the population. It is important that this capacity be retained given current needs in Haiti and its exposure to new crises. Space for focusing on key humanitarian needs should be retained in a transitioned framework through a more connected OCHA (e.g. with increased presence in the recovery and development coordination efforts) and through additional capacity at the level of the HC/RC office. In addition, more resources and capacity should be devoted to protection issues at this key stage and resettlement. Global level guidance on the multi-sectorial challenge of resettlement in Haiti as suggested in the IASC July 2010 report should be sought to inform this process.

49.   There is a real opportunity to rationalise the current cluster system and take a proactive approach to transitioning humanitarian aid coordination towards both more comprehensive sector wide approaches and stronger geographically based decentralised coordination. The GoH has above all advocated for change and moving away from the humanitarian phase.

50.   In preparing for cluster transition and taking stock of the situation of each cluster and sector, the

full range of synergies should be mapped and the attempt to merge clusters, products, and meetings exploited to the fullest so that the overall coordination structure is as light and manageable as possible. Some have been identified (e.g. Food Aid with Agriculture, Agriculture with the livelihoods group) but there are more. In addition and as suggested at the UNICEF March workshop there is room for joint management of M and E resources and programming and IM functions.

51.   Under the HC/RC's leadership with co-chairing, guidance from OCHA, UNDP, UNICEF and the IHRC,and with IASC support, a workshop could be convened to develop a tentative joint transition plan for clusters/reinforcing the capacity of Haitian institutions with elements of the following could be developed and discussed with the Government of Haiti:

- Purpose and objectives
- Strategies
- Guidelines
- Processes
- Key components
- Schedules

- Key indicators
- Major outputs
- Resource requirements
- Funding
- Budgets
- Staff requirements

The key objective will be to help foster coherence in the international response. It is important that dates for cluster transition be set. The plan should include intermediate solutions if these are more forthcoming and transitioning can be done at different speeds. Consider the merit of other transitional options. Phasing-out can involve Clusters 'merging' or 'reversing' into others to become sub-Clusters or working groups. The Cluster can also be integrated into a different but related entity (e.g. IHRC working group if its lifespan is longer).[125] Both OCHA and UNDP in Haiti are overstretched dealing with day-to-day issues. In OCHA's case, support from the HQ level –as with the CAP- but on transition, and for UNDP from BCPR/Early Recovery or specifically on governance and institutional capacity building would be welcome. Much of the time of staff is necessarily dominated by reacting to operational issues, leaving little space for strategic or proactive and creative thinking, or for ensuring stronger links between immediate plans and mid- to longer-term planning.

52.   The needs assessment for the rationalization and transitioning of clusters plan can be done through a four-fold process:

→ A bottom-up approach understanding what the array of geographically based coordination needs are at a decentralised level following the ladder from neighbourhood, to communal section, communal, departmental to national. At the local level the institutions and processes can be revitalised and strengthened (see Figure 2). Local authorities should be in a position to access and understand the tools available and take the lead role defining their coordination needs. UNDP has a role to play in supporting local governance and a stronger long-term coordination architecture.

→ A review of the future scenario understanding the plans and priorities of the GoH under the 4/5 Es: Employment, Education, Environment, *Etat de Droit* (Rule of Law), new institutions such as the Housing authority and the implications for coordination and the work carried out

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[125] James Shepherd-Barron, *Lifespan of Clusters, Clusterwise, clustercoordination.org*

by clusters to date.

→ A sector by sector analysis for a sector wide approach in support of a more coherent seamless response where the humanitarian issues, recovery and development can be addressed in parallel and preparedness, decentralization and other cross-cutting issues strengthened. This includes supporting stronger sector groups through Government and National organizations, reviewing plans, expectations and longer-term donor agency priorities, international agencies seconding personnel and placing national Haitian staff in key positions.

→ Specific concerted action for key crosscutting and multi-dimensional issues that tackle important priorities that are fundamental to address humanitarian needs, phase-out assistance (e.g. resettlement, livelihoods) and make way for a coherent framework for coordination. Determining whether these multi-sectorial issues should act as umbrellas for sectors in the recovery phase under a new revamped and improved mechanism (i.e. if the IHRC can be reformed –as often are other national frameworks for recovery coordination - or its mandate as such is not renewed).

→ Attention should be given to developing key guidelines and principles clarifying expectations and approaches for partnership on coordination. A productive partnership between local authorities and international actors rests on the latter recognising the government's ownership of the recovery process. If only in rhetoric, the latter is recognized. UN agencies and international NGOs must find practical ways of prioritising strengthening local government capacity, such as seconding national and international staff to local institutions, hands-on training, and sharing resources. In addition, as local government officials lack clear understanding of the roles in the clusters and how they can push for action, a key challenge will be that the system be understood and empower stakeholders.

53.   There is an opportunity for starting anew and reversing the negative stigma that clusters, tables and the IHRC have had in the past. The evaluation would recommend if possible renaming groupings based on the preferred term of national actors and to communicate this new restart. Although IASC guidance is flexible on terminology, the term cluster is increasingly used as the norm. This is not always helpful in settings like Haiti.[126]

54.   In Haiti, most actors are facing resource constraints and the repeated challenge of bridging the humanitarian phase with the recovery phase and securing continuous funding. Strengthening coordination capacity and transitioning clusters will require funding. A funding strategy rests on a coherent plan and proper budget preparation. A budget should estimate the cost of coordination during this recovery phase (2012-2014). The IHRC had calculated USD 1.5 million per sector to cover the cost of secretariats for the sectorial tables. An estimate of the cost of coordination and the support being currently provided through cluster leads towards funding national counterparts (e.g. the support that

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[126]IASC Guidance Note On Using The Cluster Approach To Strengthen Humanitarian Response 24 November 2006: Concerning terminology, some Humanitarian Country Teams prefer to speak of "clusters" and "cluster leads", while others prefer to stick to the more traditional terminology of "sectors", "sectoral groups" and "sector leads" (or in some cases, "working groups", "thematic groups" or "task forces"). It should be left to Humanitarian Country Teams to decide on a case-by-case basis on appropriate terminology for the country in question, depending on the working language and agency preferences. To ensure coherence, standard terminology should be used within each country and similar standards should be applied to all the key sectors or areas of humanitarian activity.

IOM provides to cover DPC incentives for instance) should be included in the analysis. The proportion of funding that has been foreseen in the CAP to cover this need should be mentioned. Cost-analysis can be factored into the plan and over time. The overall budget should be able to be divided across sectors and years to adapt as much as possible to the constraints and lack of flexibility of many donors.[127]

55.   Cluster lead agencies should attempt to embed cluster coordination capacity in their programme to support counterpart and be in a position to reactivate the cluster if needed. Recommendations also focus on reforming Human Resource practices and making better use of existing rosters, allowing temporary redeployment, considering additional capacity of partners, placing Haitian staff in key roles. In addition, while the focus has been on the role of Cluster Coordinators, the experience of Haiti shows that there is a need for deploying with a range of different functions and skills.[128]

Figure 1. Transition in OCHA's policy

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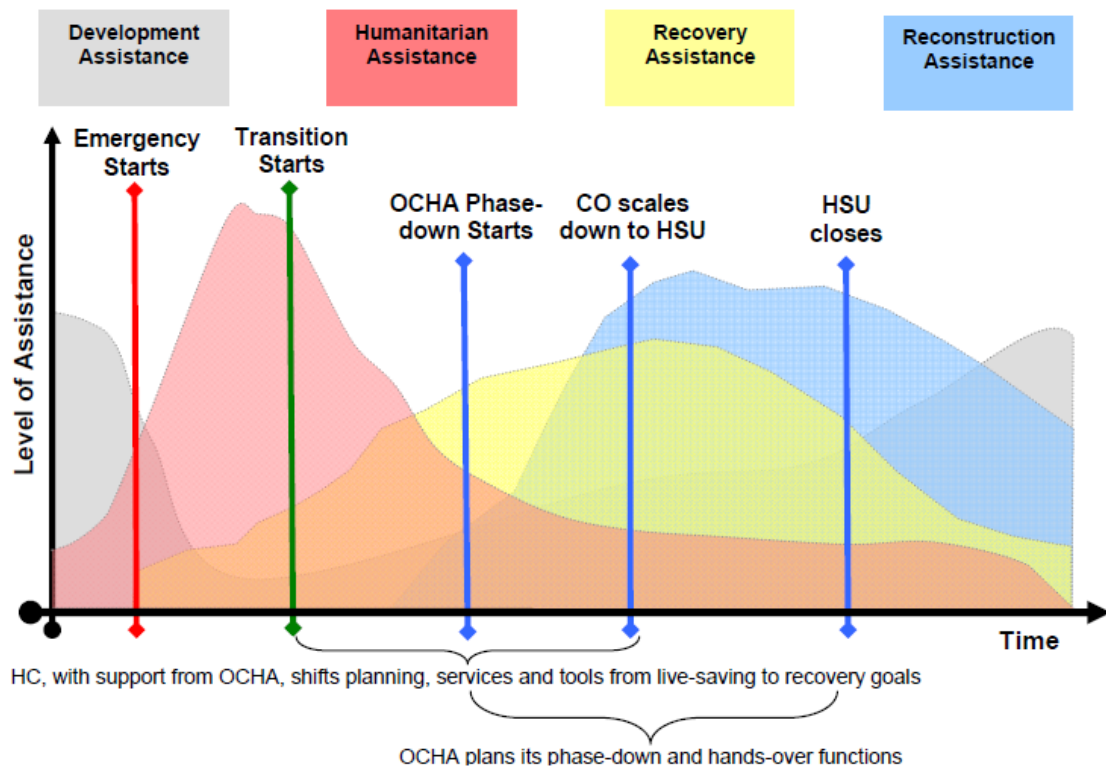
[127]Ideally instruments like the HRF would have been able to fund this programme but in practice at the time of the evaluation the fund had only USD 15 million left and estimated that best case scenario they could have USD 40 million for 2012.
[128] Interviews, Education cluster documented recommendations.

Figure 2. Local Institutional Architecture[129]
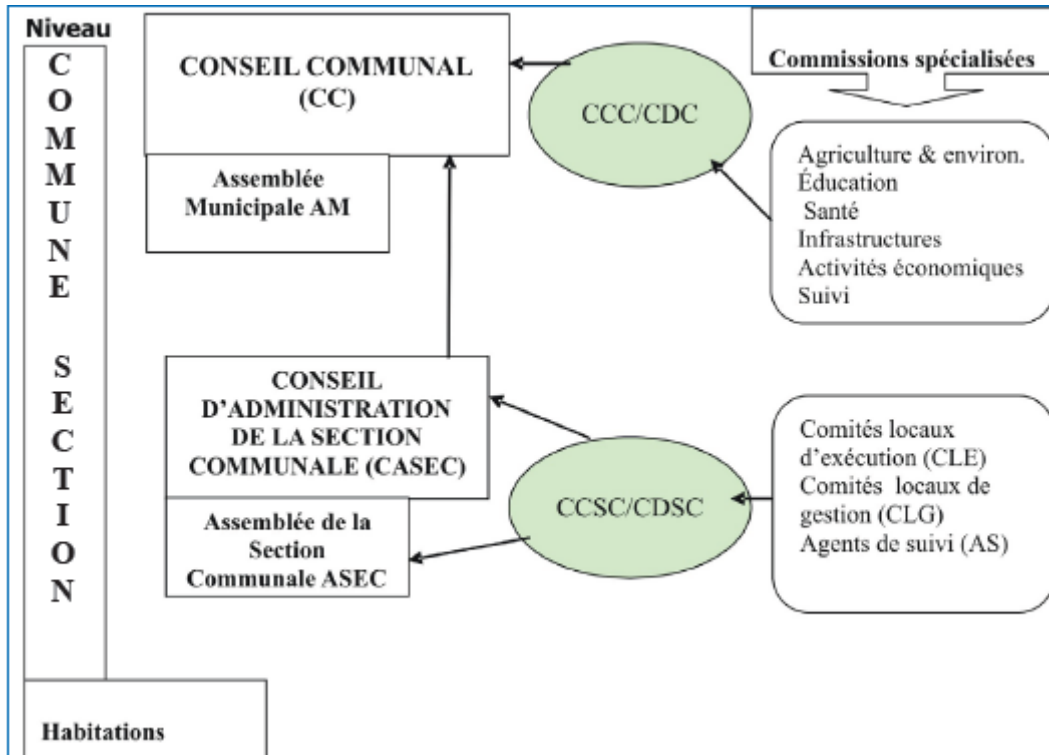
Source: FENU, *Leçons du Programme de Gouvernance Locale dans le Nord'Est*, (October 2007)

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[129]Conseil de Développement de la section communale (CDSD), Conseil de Développement de la commune (CDC), Conseil de Développement du département (CDD). CCC are comprised by the Mayor, deputy Mayors, CSO representatives, the CCSC (coordinators CASEC, ASEC members) et members of the decentralised Administration. The CCSC comprise local elected leaders (CASEC), ASEC members and representatives of the *habitations*.

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WASH Cluster DINEPA, HAITI EARTHQUAKE RESPONSE, WASH CLUSTER, STRATEGIC OPERATIONAL FRAMEWORK, June - December 2010, DRAFT 2

Annex 5: Timeline

2008   August/September - Nearly 800 people are killed and hundreds are left injured as Haiti is hit by a series of devastating storms and hurricanes.

2008   September - Michele Pierre-Louis succeeds Jacques-Edouard Alexis as prime minister.

2008   November - A school in Port-au-Prince collapses with around 500 pupils and teachers inside. The authorities blame poor construction methods.

2009   May - Former US President Bill Clinton appointed UN special envoy to Haiti.

2009   July - World Bank and International Monetary Fund cancel $1.2bn of Haiti's debt - 80% of the total - after judging it to have fulfilled economic reform and poverty reduction conditions.

2009   October-November - Jean-Max Bellerive becomes prime minister after the Senate passes censure motion against his predecessor, Michelle Pierre-Louis.

2010   January - Up to 300,000 people are killed when a magnitude 7.0 earthquake hits the capital Port-au-Prince and its wider region - the worst in Haiti in 200 years.
US takes control of the main airport to ensure orderly arrival of aid flights.

2010   March - International donors pledge $5.3 billion for post-quake reconstruction at a donor conference at UN headquarters.

2010   April – First phase of the IA-RTE

2010   July - Popular anger grows over slow pace of reconstruction six months after quake.

2010   October - Run-up to presidential, parliamentary polls due on 28 November. Concern over exclusion of popular candidates. Protests.

2010   October-December - Cholera outbreak claims some 3,500 lives and triggers protests.

2010   November - Presidential and parliamentary elections.

2010   December - Announcement of inconclusive provisional results of presidential election triggers violent protests.

2011   January - Former president Jean-Claude Duvalier returns from exile, faces corruption and human rights abuse charges.

2011   March - Michel Martelly wins second round of presidential election.

2011   May - Michel Martelly takes up office as president.

2011   July – CAP Mid-Year Review is revised from over 910 million to 382 million USD.

2011   August - Death toll from cholera outbreak climbs to nearly 6,500.

2011   September CAP 2012 Workshop and ERC visit to Haiti

2011   October - President Martelly appoints UN development expert Garry Conille as his prime minister, after parliament rejected his two previous nominees.

Annex 6: Recommendations from the working group on Communications at the RTE workshop

September 27th 2011, Hotel Montana, Port-au-Prince.

- Implement the accountability framework
- Mainstream accountability toward the affected population
- Improve communication about "eviction" toward people living in the camps
- Give a voice to the communities and not only to the camps
- Include Youth in the communication agenda
- Integrate other stakeholders in the communication / advocacy chain: Artists and Artisans, Universities
- Use of new technologies in the communication / capacity building effort (cellular technology, social networks)
- Strengthen protection issues responsively in the information sharing
- Open the participation of the population in decision making processes
- Develop communication messages with the population including pre test of messages (language codes)
- Give a voice to all actors and improve information sharing globally
- Establish a clearinghouse with critical baseline information
- Approach CDAC to serve as the clearinghouse manager
- Use IHRC in mapping progress
- Share the tools validated by the MCFDF Ministry of Women Affairs (national concertation tools)
- Communicate population needs assessment to donors
- Brief journalists and media on the critical needs of the population, key problems and the results of the response
- Improve communication regarding "eviction" toward IDPs beyond 16/6 initiative
- Design and implement an advocacy campaign to address housing and key sectoral issues
- Integrate civil society and Universities in the debate about transition
- Strengthen decentralization of information
- Improve communication on needs assessment internally between country office and headquarters (donors will be better informed)
- Coach local authorities and community organizations before transferring the interventions to them
- Integrate conflict prevention and mitigation (do no harm) in the response communication strategy
- Ensure the population is continuously briefed about plans and progresses during the response cycle
- Put people first in the communication process and information sharing
- Implement a communication network among all actors using the modern media connected to the Web

Annex 7: Overview of coordination frameworks

1.   Overview of Coordination Framework foreseen July 2010
          Source: Interview office of the PM

G-12+Ministere du Plan
+Ministere des Economies et
Finances

Ministeres Principaux
MPTPC
MSPP
MENFP
MARNDR
MSPJ
MICT

Autres Partenaires
Autres agences de
développement
hors G-12
ONGs
Société Civile
Secteur Privé

Banque Mondiale
BID
FMI
USAID
Canada
Espagne
France
Nations Unies
Union Européenne
Norvege, Japon, Brésil

Autres Ministeres

CIRH

HRF
Autres mécanismes
de financement

Tables Sectorielles:

Infrastructure et Energie
Eau et Assainissement
Santé et Nutrition
Agriculture et Environnement
Securité Alimentaire
Etat de Droit
Gestion des Risques
Renforcement des Institutions

Commission Présidentielle
Groupe de Travail Interministeriel
sur les personnes déplacées

Groupe de Travail inter-
ministeriel

**Mécanismes de Coordination
Humanitaires**
Comité de Soutien a la Coordination
CSC
Equipe Coordination du Pays (HCT)
Coordination Inter-Cluster (ICC)
Clusters: CCCM, Logistique, ETC,
Protection, Santé, Alimentaire,
Agriculture...

2. Sectoral Coordination: Clusters and Other Coordination Initiatives.

Global clusters	Clusters activated in Haiti (2010-2011)	GoH cluster co-lead or counterpart	CIRH Objective/ expertise	Haiti Action Network group
Agriculture **FAO**	Agriculture FAO	MoA / Table		
Early Recovery **UNDP**	Early Recovery **UNDP**		**Recovery**	
	Debris	MTPTC	**Debris**	**x**
	Livelihoods		**Job creation**	**x**
	Logement Quartier	Mairies Future housing authority (HA)	**Shelter**	**Shelter WASH**
Education **UNICEF /SCF**	Education **UNICEF /SCF**	MoE	Education	X
Emergency Shelter **IFRC**	Shelter **IFRC UN Habitat**	Mairies & HA	Housing	X
ETC **OCHA/WFP/UNICEF**	ETC **WFP** dormant	-		
Food Security **FAO/WFP** (as of April 2011)	Food Aid **WFP** *unofficial phase out*	MoA CNSA		
Logistics **WFP**	Logistics WFP			
CCCM **UNHCR/IOM**	CCCM **IOM (to be merged)**	DPC and Mairies	Housing	(shelter)
Protection **UNHCR** **SUB-CLUSTERS** **Child Protection UNICEF** **GBV UNFPA** **RoL/Justice UNDP/OHCHR** **Housing/Land/Property UN Habitat** **Mine Action UNMAS**	Protection **OHCHR/ MINUSTAH** **SUB-CLUSTERS** **Child Protection UNICEF** **GBV UNFPA**	IBRS MCF		
Health **WHO**	Health **WHO**	MoH	Health	X
Nutrition **UNICEF**	Nutrition **UNICEF**	MoH		
WASH **UNICEF**	WASH **UNICEF**	DINEPA	Water & Hygiene	X
Cross-cutting issues HIV/AIDS **UNAIDS** Gender **UNFPA** Environment **UNEP** Age **Help Age International** **Disaster Risk Reduction**			Gender DRR… Environment	*Culture Energy*

3.   IHRC 11: Planned Sectoral Tables[130]

Source: Various

Planned Sector tables/coordinating entities - IHRC Strategy for **Supporting and Reinforcing the Capacity of Haitian Institutions (December 2010)**			
Sector	**Government Chair**	**Sector**	**Government Chair**
Housing	MAST, as chair of the inter-ministerial commission on Housing	Water, sanitation and hygiene	DINEPA
Debris removal	MTPTC	Rule of law	MSPJ
Agriculture and environment	MARNDR and MOE	Risk reduction and management	MICT
Food security	CNSA	Institutional building and decentralization	MPCE and MEF
Health and nutrition	MSPP	Infrastructure	MTPTC
Education	MENFP		

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[130]The Commission's mandate is set to expire in October 2011. The main goal of one of the seven objectives of the CIRH – capacity building for coordination- has not been targeted by projects. After growing pains implementors now claim that the IHRC is at the point where one would have wanted it be over a year ago. Capacity building in the context of resigning Ministers and in absence of a new government has also been a constraint.

Annex 8: Focus groups, general meetings observed and visits

DATE	DESCRIPTION	ORGANIZATION	NAME	POSITION
August 29, 2011	HCT meeting			
August 30, 2011	Focus group	Concern Worldwide	Marie Guerda J. Débrosse	Project Manager
		CARE	Yves-Laurent Régis	Coordonnateur Suivi, Évaluation, Plaidoyer
		LCH / Droits humains	Gabriel Toussaint	PDG
		OPS - OMS	Stéphane Lapierre	Coordonnateur Santé / PED
		Save The Children	Martial N. Bailey	Plaidoyer, Politiques, Liaison avec GoH
		PAM	Widline Cherichel	Sr Programm Assistant
		Groupe de Concertation des Femmes Victimes de Violence	Marguerite Salomon	Coordonnatrice
		Groupe de Concertation des Femmes Victimes de Violence	Olguine Douarjy	Agent Communautaire
August 31, 2011	Camp Visit (Croix-des-Bouquets / Marassa)	IOM	Annabel Monplaisir	Camp Manager Marassa
August 31, 2011	Camp Visit (Corail)	IOM	Alain Kamgary	
August 31, 2012	Task Force - Mairie Croix-des-Bouquets			
September 1rst, 2011	Focus group with local based organizations (2 women & 13 men) in Leogane			
September 1rst, 2011	Focus group with a group of IDPs evicted from Sylvio Cator Stadium (5 women, 3 men)			
September 1rst, 2011	Camp Visit - Parc Jean Marie Vincent			
September 2nd, 2011	Meeting of the working group Cluster Protection (Tabarre)			
September 5, 2011	Visit to UNOPS warehouse shelter production site in			

	Tabarre and surrounding communities			
September 6, 2011	Focus group with a group of women			
September 6, 2011	Visit to Bristou-Bobin	UNOPS	Mathieu Bastein	Field Coordinator
September 7, 2011	Focus group with local authorities and representatives from local based organizations			
September 9, 2011	UNICEF HQ Focus group in NY	UNICEF	Erica Mattellone	Evaluation Specialist – Humanitarian
		UNICEF	Cecilia Sanchez	Health Specialist, Programme Division
		UNICEF	Kate Alley	Emergency Specialist, Emergency Programmes
		UNICEF	Vijaya Singh	Emergency Specialist, Early Childhood Development, Programme Division
		UNICEF	Bill Williams	Global WASH Cluster
		UNICEF	James Hedges	Programme Specialist, Programme Division
September 16, 2011	Focus group	CARE	Enithe Joseph Laucia Malvoisin	
		CARE	Wida Marc Emmanuel Marieu	
		CARE	Schyler Lamartinière	
		CARE	Herby Paul	
		IEDA Relief	Jeanty Jude André	Field Supervisor Leogane Sub Office
September 16, 2011	Camp visit in Leogane	CARE	Gérard Foster Boulin	Coordonnateur d'enregistrement et de validation des shelters
September 16, 2011	Camp visit in Leogane	Camp Tet Ansanm	Jean-Augustin Dieujuste	Président
September 16, 2012	Camp visit in Leogane			

Annex 9: List of Persons met

ORGANISATION	NAME	POSITION
ACF	Alain Coutand	Chef de Mission a.i.
Office of the PM of Haiti /NORAD	Joel Boutroue	Adviser/ Representative
AECID	Maria Civit	Responsable de proyectos para la Reconstrucción Punto Focal de Asuntos Humanitarios Oficina Técnica de Cooperación en Haití
APDDLF	Israël Laurore	
Camp Tet Ansanm	Jean-Augustin Dieujuste	Président of the Camp (Leogane)
CARE	Enithe Joseph	
CARE	Gérard Foster Boulin	Coordonnateur d'enregistrement et de validation des shelters
CARE	Herby Paul	
CARE	Laucia Malvoisin	
CARE	Rosna Baptiste	Project Manager de santé / reproduction
CARE	Schyler Lamartinière	
CARE	Wida Marc Emmanuel Marieu	
CARE	Yves-Laurent Régis	Coordonnateur Suivi, Évaluation, Plaidoyer
Caritas Austria	Grev Hunt	
Caritas Austria	Joseph Tout-Puissant	
CASEC	Victor Vilbon	
CCO	Aurélie Proust	CCO Representative
CCP Ch	Ernest Fleurisca	
CDAC	Benjamin Noble	Coordonnateur
Comité Jeunesse	Paul Darlène	
Concern Worldwide	Anne O'Mahony	Country Director
Coopération Canadienne	Roberts Waddle	Coordonateur de l'aide
Coopération Canadienne	Sandra Berberi	Premiere Secretaire (Cooperation)
Croix Rouge Canadienne	Isabelle Hachette	
Direction de la Protection Civile (DPC)	Jean-Rilus Wilson	
Direction de la Protection Civile (DPC)	Mme Nadia Lochard	Directrice de la Protection Civile, Département de l'Ouest

Direction de la Protection Civile (DPC) de Léogane	Joseph Philippe	
DRLA Tulane University	Shannon Strother	Humanitarian Evaluation Consultant
ECHO	Damien Berrendorf	Head of Office
ECHO	Daniel Ureña-Cot	Technical Assistant
ECHO	Elke Leidel	Technical Assistant, former Concern Worldwide Country Director
Ecole Nationale de Corail	Sansoir Boyer	
FAO	Adam Vinaman Yao	Coordonnateur du Programme des Urgences et de la Réhabilitation
FAO	Carmen Morales Fales	Coordonatrice des Opérations
FAO	Volny Paultre	
Groupe de Concertation des Femmes Victimes de Violence	Marguerite Salomon	Coordonnatrice
Groupe de Concertation des Femmes Victimes de Violence	Olguine Douarjy	Agent Communautaire
Haiti Reconstruction Fund	Diego Osorio	Senior Operations Officer
Haiti Reconstruction Fund	Josef Leitmann	Administrator
Haiti Reconstruction Fund	Pauline Zwaans	Agent des Operations
ICRC	Simon Ashmore	
IEDA Relief	Charles Edson	Field Coordinator
IEDA Relief	Jeanty Jude André	Field Supervisor Leogane Sub Office
IFRC	Camelia Marinescu	IFRC Watsan programme WATSAN Delegate
IFRC	Eduard Tschan	
IFRC	Ignacio Martin Eresta	Independent consultant, shelter study
IFRC	Luis Luna	Humanitarian Diplomacy Coordinator
IFRC	Marcel Goyeneche	
IFRC	Margaret Stansberry	
IFRC	Paula Fitzgerald	PM&E Delegate
IFRC	Xavier Genot	Shelter Movement Coordinator
IFRC	Xavier Génot	Shelter Movement Coordinator - Coordinateur Abris Mouvement
Internews	Philippe Allouard	Chef de Mission
IOM	Alain Kamgary	
IOM	Alix Cherisier	CMO/ Parc Jean Marie Vincent
IOM	Annabel Monplaisir	Camp Manager Marassa
IOM	Bakary Doumbia	Head of Programme Support and Coordination Unit

IOM	Bradley Mellicker	Emergency Preparedness and Response Officer
IOM	Flore Hibart	Assistante Protection
IOM	Frantzy Bazelais	
IOM	Giovanni Cassani	Cluster Coordinator
IOM	Leonard Doyle	Public Information Officer
IOM	Luca Dall'Oglio	Chief of Mission
IOM	Marc Levesque	
IOM	Melanie Megevand	Protection Officer
IOM	Nathalie Adolphe	Assistante Protection
IOM	Oscar Umerez	
IOM	Pierre Thébuseats	Assistant du CMO Croix des Bouquets et Cite Soleil
IRC	Anissa Badaoui	CYPD Coordinator, Haiti
LCH / Droits humains	Gabriel Toussaint	PDG
Mairie de Gressier	Paul Jean Michelet	
Mairie de la Croix des Bouquets	Larius Jean Saint-Ange	
Mairie de Léogane	Jean-Ponny Charles	
MINUSTAH	Abah Kadiri	
MINUSTAH	Shayne Gilbert	Chief Joint Operations and Tasking Centre - JOTC
MODEL Mouvement Organisationnel pour l'Environnement et le Loisir	Yonel Bissainthe	Coordonnateur
MTPTC	Alfred Piard	Responsable des Travaux Publics
MTPTC	Ronald Laraque	Consultant
OCHA	Ibrahima Barry	
OCHA	Jean Herve Beauport	OCHA Leogane
OCHA	Jean-Luc Kramo	Information Management
OHCHR	Elsa Le Pennec	Cluster Lead
ONU-HABITAT	Denise Venturini	
ONU-HABITAT	Jean-Christophe Adrian	
OPS - OMS	Stéphane Lapierre	Coordonnateur Santé / PED
OXFAM GB	Franklin Gregory	
OXFAM GB	Pierrot Eslandre	
PAHO/WHO	Dr. Dana Van Alphen	Regional Advisor Area on Emergency Preparedness and Disaster Relief
PAHO/WHO	Esther vand der Woerdt	Cluster Coordinator
PAHO/WHO	Josiane Bizimana	
PAHO/WHO	Juan Carlos Gustavo Alonso	Advisor Emergency Prepardness and Disaster Relief
PAM	Widline Cherichel	Sr Programm Assistant
PLAN HAITI	Sissi Lamour	

PAHO/WHO	Peter Graaff	Representant de l'OPS/OMS en Haiti
President's Cabinet	Patrick Rouzier	Advisor to the President / Housing
Projet Winner	Jean Robert Estime	Director
Protection Civile	Saïl Idelonde	
Représentant du Président	Raoul Kessa	
SASH	Melanie Coull	
SASH	William Brown	
Save the Children	Gary Shaye	Exective Director
Save The Children	Martial N. Bailey	Plaidoyer, Politiques, Liaison avec GoH
UN HC/RC	Elisabeth Diaz	Coordination Officer Office of the Resident Coordinator and Humanitarian Coordinator
UN HC/RC	Nigel Fisher	Humanitarian Coordinator / Resident Coordinator / DSRSG
UNDP	Fenella Frost	
UNDP	Hind Sadik	
UNDP	Jessica Faieta	Senior Country Director
UNDP	Rebeca Grynspan	Associate Administrator, UN Under-Secretary- General
UNDP	Thomas Pitaud	Chief Technical Advisor, PASNGRD
UNFPA	Gabriel Bidegain	
UNFPA	Hernando Clavijo	Country Representative
UNFPA	Sian Evans	Protection Sub cluster GBV
UNICEF	Bill Williams	Global WASH Cluster
UNICEF	Cecilia Sanchez	Health Specialist, Programme Division
UNICEF	Erica Mattellone	Evaluation Specialist – Humanitarian
UNICEF	Francoise Gruloos-Ackermans	Country Representative
UNICEF	James Hedges	Programme Specialist, Programme Division
UNICEF	Kate Alley	Emergency Specialist, Emergency Programmes
UNICEF	Mohammed Fall	Education Cluster Coordinator
UNICEF	Vijaya Singh	Emergency Specialist, Early Childhood Development, Programme Division
UNICEF CO	Asako Saegusa	M&E Manager
UNICEF CO	Kelly Ann Naylor	WASH Cluster (working on transition strategies)
UNICEF CO	Sandra Lattouf	Chief of Field Operations
UNICEF CO	Silvia Danailov	Senior Recovery Advisor
UNICEF TACRO	Gianluca Buono	Regional Emergency Adviser
UNOCHA	Anna Dmitrijewa	Humanitarian Affairs Officer OCHA - Léogane
UNOCHA	Charles Bernimolin	Desk Officer, Haiti
UNOCHA	Esteban Sacco	Strategic Planning Officer
UNOCHA	Gwi-Yeop Son	Director, Corporate Programmes
UNOCHA	John Ging	Director, CRD
UNOCHA	Matthew Hochbrueckner	Planning Officer
UNOCHA	Philippe Verstraeten	Head of Office
UNOCHA	Rosaria Bruno	Humanitarian Affairs Officer

UNOCHA	Sarah Muscroft	Policy Advisor on Transition and Early Recovery en United Nations
UNOCHA	Tijana Bojanic	Humanitarian Evaluation Officer Evaluation and Guidance Section
UNOCHA	Valerie Amos	Emergency Relief Coordinator
UNOCHA	Zola Dowell	Chef de section de l'Afrique et de la region Caraibes
UNOPS	Brian Leo Treacy	Operations Centre Director and Representative
UNOPS	Felipe Munevar	
UNOPS	Irfan Hameed	Shelter
UNOPS	Suranga Mallawa	Programme Manager
USAID	Andrew Kent	Program Officer, OFDA
USAID	Anthony S. Chan	Deputy Director
USAID	Herbie Smith	Deputy Mission Director for USAID/Haiti
USAID	Susan DeCamp	Deputy Program Officer
Viva Rio	Pedro Penna	Assistant, Directeur Centre Perles Noires
WFP	Myrta Kaulard	Country director
WFP	Stephen Kearney	Deputy Country Director
WFP	Viviana De Annuntiis	Emergency Preparedness & Civil Military Liaison Officer
Wingroup	Gregory Mevs	
World Bank	Alexander Abrantes	Special Envoy, Haiti

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