I. Introduction

This report presents the findings and recommendations of the review of the cluster approach on the humanitarian response in Colombia four years after implementation of the humanitarian reform as recommended by the Inter Agency Standing Committee (IASC) mission report of 2006. It identifies strengths and gaps in the implementation of the reform and provides recommendations on the way forward.

The report is based on extensive document analysis, a ten day country visit by an 11 member inter-cluster mission\(^1\) and additional telephone interviews and email conversations with relevant actors. The mission programme included meetings with the Humanitarian Coordinator (HC) and Humanitarian Country Team (HCT), OCHA and several Country Representatives of Cluster Lead Agencies. The in-country time included visit to, and town meetings with displaced communities of the displaced and municipal and regional officials in the provinces of Narino (Charco, Tumaco, Samaniego, Pasto) and Montes de Maria and Soacha as well as meetings with the local agency representatives. Discussions in the field locations were followed by interviews in Bogota with host and donor government officials, civil society organizations, international and Colombian humanitarian and human rights groups (including NGOs). Interviews in the country during the fortnight combined with discussions with persons in Geneva and New York helped generate the findings presented and analyzed in the following section.\(^2\)

In analyzing the situation and developing its recommendations, the mission took into account the findings of the IASC COLOMBIA NATIONAL WORKSHOP held in BOGOTA on 6-7 MAY 2010\(^3\). It also took into consideration recent discussions on Colombia within the framework of the Executive Committee on Humanitarian Affairs (ECHA) on 18 June 2010, and subsequently within the UN Secretary-General’s Policy Committee.

Preliminary findings were presented to and discussed with the Humanitarian Coordinator, the Head of UN OCHA in Colombia and the HCT in country during a half day workshop on 29 June 2010. These findings and recommendations were

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\(^1\) Intercluster mission to Colombia, headed by the Agriculture Cluster (FAO), and senior staff from Early Recovery (IOM and UNDP), WASH (UNICEF), Nutrition (UNICEF), Food and Telecommunications (WFP), Education (Save the Children and UNICEF), Protection (UNHCR, UNICEF and UNIFEM), Cross-cutting Issues (OCHA) and Inter-Cluster Coordination (OCHA), June 2010. The Terms of Reference are attached in Annex 1.

\(^2\) For a comprehensive list of meetings, please see Annex 2 for all persons interviewed and/or consulted.

\(^3\) Report of the IASC Colombia National Workshop, Bogota, 6 to 7 May 2010.
discussed by specific thematic working groups during the workshop, further refined in the working groups and presented back by members of the HCT at the workshop. Recommendations relative to individual clusters were not presented at the workshop and were incorporated into this report after consultation with respective Cluster Lead Agencies.

II. Background

In April 2006, Colombia’s IASC principals decided to include Colombia in the roll out of the humanitarian reform, being at that time the only country prioritized for the implementation of the reform in Latin America and the Caribbean. At the time, it was understood that the challenges posed by Colombia’s humanitarian situation require “...greater cohesion amongst members of the international humanitarian community to ensure the credibility and effectiveness of the overall response...the apparent difficulties of UN agencies in the past to develop a common vision on humanitarian, human rights and development issues has also weakened the UN’s capacity to respond effectively”.

The IASC Support Mission to Colombia led by Mr. Dennis McNamara (September 2006) subscribed a series of recommendations to improve in-country humanitarian coordination mechanisms in line with the Humanitarian Reform principles. They included: i) consolidate IASC country team as the main coordination mechanism; ii) ensure a coherent approach to humanitarian action and a common vision; iii) coordinate with national authorities, State institutions and civil society; iv) develop an IASC CT strategy and yearly work plan; v) establish three IASC thematic groups to promote common approaches; vi) reinforce the humanitarian presence in the field; vii) promote area- and community-specific approaches; viii) reinforce local institutions; and ix) improve information management on the humanitarian situation and response.

Four years after the 2006 McNamara mission, the humanitarian situation in Colombia continues to be challenging: including problems relating to forced displacement, and breaches by parties to the armed conflict of human rights and international humanitarian law. Although the security situation has improved in certain parts of the country in the last eight years, security remains tenuous in rural and urban areas because of the emergence of new structures of illegal armed groups fighting for control over the territory, routes and production, processing and trafficking of drugs and illicit activities. This has led to the confinement of targeted communities and new displacements, as an apprehensive civilian population has found itself in the middle of fighting for control over territories (e.g. control over strategic corridors for the transport of weapons and drugs) and populations (recruitment of children, adolescents and young adults).

The dynamics and geographical scope of the conflict are constantly evolving, further drawing in communities and individuals who are called to provide intelligence for the Army and the illegal armed groups. While the Government of Colombia refers to
rearmed paramilitary groups as “criminal bands involved with drug-trafficking” a recent report by Human Rights Watch points out that the new bands are engaging in widespread and serious abuses against civilians, including massacres targeting indigenous and afro-Colombian communities, killings, rapes, threats, and extortion.

Discussions around the possibility to field another inter-cluster coordination mission were initiated immediately after the visit of the UN Under-Secretary-for-Humanitarian-Affairs and Emergency Relief Coordinator, Mr John Holmes to the country in February 2009. At the request of the Humanitarian Coordinator and the HCT, the IASC Inter-cluster Coordination Mission was fielded on 21 June 2010 to 30 June 2010. The Mission was tasked with:

- reviewing the implementation of the recommendations of the IASC mission report of 2006, with a view to validating the achievements, challenges and remaining gaps in the implementation of the humanitarian reform agenda in Colombia as identified by the Colombia HCT,
- strengthening global level support to the IASC HCT, and
- providing the basic elements of a common humanitarian strategic framework.

During the four years following the McNamara mission, the members of the Humanitarian Country Team have done their best to respond to a rapidly mutating crisis with the tools and resources that they had at their immediate disposal. It is important to commend the enormous efforts made, and the significant achievements despite the limitations due to the context and resources.

III. Context

Colombia’s internal armed conflict dates back 50 years. Serious violations of human rights and International Humanitarian Law as a direct consequence of ongoing fighting have been reported each year. As a direct consequence, Colombia figures as one of the world’s largest crises of internal displacement, with more between 3.2 million and 4.9 million people being displaced since the mid-1990s.

Humanitarian analysts have pointed to the fact that the conflict has undergone transformation, as a result of the increased capacities of Government’s military forces and Government’s efforts to disarm and demobilize an estimated 30 000 paramilitaries. To counteract the expanded capabilities of the military, these paramilitaries have regrouped into strengthened insurgent groups. It is estimated that guerrillas and paramilitary organizations are present in 31 of the country’s 32 departments and that these armed groups sustain their military operations by controlling land and people, often through the use of anti-personnel mines and

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4 Official government figures quote 3.2 million IDPs while humanitarian agencies estimate that the number is significantly higher with approximately 4.9 million IDPs. This discrepancy in numbers relates to the different categories that are used to determine who is an IDP.
improvised explosive devices. This has brought greater pressure on communities whose civilian causalities have actually increased from 24% since 2008 to 35% in 2009. Moreover, for those communities taking part in state programmes associated with the substitution of illicit crops or collaborating with the security forces, there are increased risks of reprisals by these insurgent groups. Civil society groups, particularly local leaders, are especially exposed as the armed groups seek to eradicate all challenges to their control of the territory.

The Government of Colombia (GoC) currently describes the conflict as a “terrorist threat” or a “situation of violence” and actively promotes the idea that the situation is one of post-conflict. In addition, the Government’s civil-military policy involves the strengthening of state control over territories and foresees deployment of defense resources to ‘welfare or social projects’. More recently, Presidential Directive 001 reinforces the links between civil and military action, insisting on a military presence in order to consolidate state presence in zones of strategic importance. The latter had the perverse effect of increasing the risks for communities and institutions which carry out humanitarian work. In such a situation, space for principled humanitarian action and humanitarian access to the population in need is also under stress and is being further jeopardized.

Related to this point is the Government’s alignment of its commitments under the Paris Declaration on Aid Effectiveness with its Policy of Social Consolidation. The former focuses on national ownership of development processes, including those undertaken by international actors. The GoC often uses the Paris agenda to justify its civil-military policies, by extension, casting a further veil on the serious humanitarian crises in the country.

The following provides a snapshot of key dimensions of the humanitarian problem in Colombia:

- **Child soldiers**: There are no official data on child soldiers in Colombia; UN Agencies revealed that 11,000 boys and girls are recruited by non-state armed actors. In many areas of the country, especially the Orinoquia region on the eastern of Colombia, fear of forced recruitment of children, mainly by FARC, is the main reason for displacement.

- **Indigenous communities**: Violence, forced displacement and territorial confinement of local communities for example due to roadblocks are threatening the survival and culture of the indigenous communities in the country. Indigenous ancestral territories in the departments of Arauca, Cauca, Vaupés, Nariño and Chocó are affected by mines and continue to be used as battlefields by armed actors that control drug trafficking routes crossing their territories reaching the Pacific and Atlantic oceans. These situations, together with the historical marginalization and exclusion, structural problems of poverty, malnutrition and illiteracy have placed indigenous communities at high levels of risk.
• Afro-Colombian communities: UN Special Rapporteur on Minorities, Ms. Gay McDougall, who visited Colombia in February 2010, urged the Government to protect the rights of Afro-Colombians who are increasingly being forced off their lands by illegal armed groups and mega projects such as the expansion of extractive industries (oil palm, commercial tree plantations, mining, oil and gas exploration) which have an important impact on their land tenure, resource management systems and livelihoods. Community leaders are especially at risk in Chocó and Cauca. The Rapporteur also noted that Afro Colombians constitute 25% of the population, not 10%, as commonly reflected by the Government of Colombia.

• GBV: Violence against girls and women related to the armed conflict has been increasing but official data fails to reflect the magnitude of the problem. It is plausible to believe that the number of rapes far surpasses the number reported, as many girls and women fail to denounce abuses committed against them fearing retaliation or lacking credibility in state institutions.

• Natural Disasters: Colombia is becoming increasingly vulnerable to natural disasters. Although the number of deaths has decreased in recent years due to increased capacity in the emergency response in Colombia, the economic loss is growing faster and therefore hampering progress exponentially. Colombia is an example of the interface of conflict and natural disasters. The same displaced population is being affected by internal armed conflict and floods, landslides caused by “El Niño” phenomenon and volcanic eruptions. Despite drought, heavy rains have resulted in flooding in various parts of the country. From 3 to 4 March 2010, four low-magnitude earthquakes (3.4 – 5.2 in the Richter scale) were registered. Women and children constitute 40% of the affected population.

In recognition of the deepening humanitarian crises in Colombia, the Executive Committee on Humanitarian Affairs (ECHA) recently had a discussion point in its agenda the humanitarian crises of Colombia and deliberated the following key points on 18 June 2010:

- The UN in both headquarters and the field should use the opportunity of the new Government to reaffirm their concern for the impact on the civilian population, and humanitarian consequences, of the armed conflict. They should reiterate the obligations of all parties to conflict to respect and protect civilian populations in accordance with international humanitarian law and human rights law.

- Encourage the HC and the HCT to continue furthering principled humanitarian work, particularly by significantly enhancing civil-military

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5 2009 Global Assessment Report on Disaster Risk Reduction, United Nations ISDR.
coordination from a humanitarian perspective, promoting humanitarian access and addressing risks to the protection of civilians. The specific context of UN support to humanitarian demining should be reaffirmed within the above framework, i.e. avoiding the involvement of UN in humanitarian demining promoted by military units.

- The HCT should prepare a common advocacy strategy as well as a common framework for action to focus on specific geographical areas and population groups particularly affected by the armed conflict (ethnic groups, women and children) that should include early recovery initiatives.
- A special HCT interagency mechanism should be developed to address the serious humanitarian crisis affecting Indigenous and Afro-Colombian communities, in consultation with relevant partners (GoC, indigenous organizations).
- ECHA members should advocate for a mission of the SRSG on Sexual Violence in Armed Conflict to Colombia as soon as possible.
- The ERC should discuss with DPA, in consultation with ECHA members, whether a high level mission to Colombia soon would be possible to engage with the new Government and ensure participation in the presidential inauguration.

Further to the ECHA meeting, the Secretary-General’s Policy Committee, which met on 7 July 2010, confirmed the need to “...... reaffirm their concern about the impact of the armed conflict on the civilian population, as well as the obligations of all parties to protect civilians in accordance with IHL and human rights law”.

IV. Key observations and findings

Against this background and context, the mission based their findings upon the following general considerations:

- How can the humanitarian community in Colombia strengthen intercluster coordination at the national and field level in order to ensure the most appropriate and timely response to humanitarian needs?
- Where are the key areas in need of focused investment – both in terms of human and financial resources - to be made to support that response, both at the national and local levels?
- How can strategic and operational engagement within the HCT be improved to ensure more effective humanitarian action?

The 2006 McNamara mission cited the apparent difficulties of UN agencies in the past to develop a common vision on humanitarian, human rights and development issues which weakened the UN’s capacity to respond effectively. The 2010 mission found that there is still a lack of a shared vision and mechanisms for prioritization, collective decision-making and accountability, and the findings as a whole reflect
this. As in the 2006 mission, the 2010 Inter-cluster Coordination mission did not attempt to undertake a detailed review of all aspects of the humanitarian response in Colombia. Rather the mission made the following observations and findings. These are summarized as follows:

1. A common humanitarian framework should be developed which reflects the HCT collective understanding of needs and priorities in the context of Colombia. The aim of such a strategic framework would be to provide the HC and HCT the tools to prioritize actions and resources in a strategic way, according to the needs as assessed on the ground. It would also imply a common platform for arguing for required access to the most vulnerable. Currently, prioritization seems to be undertaken on the basis of agency mandates or other non-objective criteria. Needs identification, prioritization and gap analysis remains patchy, and does not always translate into corresponding sectoral strategies or decisions. In addition, because of lack of shared priorities, cross-cutting issues are not adequately addressed and/or are not mainstreamed.

2. A comprehensive multi-sectoral evidence-based needs assessment, mapping out vulnerabilities and risk response plans is suggested. Common tools for understanding and analyzing the crisis, including needs assessments, should be agreed upon in order to create a common basis for measuring and comparing levels of vulnerability, risks and local capacities. On the basis of a multi-sectoral needs assessment a common internal humanitarian framework could be formulated and owned by all actors of the humanitarian community.

3. A shared advocacy strategy toward the government should be articulated to address areas of contention in relation to humanitarian response. These include issues of humanitarian access, the government's policy on civil-military cooperation, respect for International Humanitarian Law, and human rights, as well as humanitarian principles of neutrality, impartiality and independence. Advocacy efforts by the humanitarian community are currently suffering from the lack of consensus on priority advocacy needs and agreement on a common strategy for humanitarian action. Given the complexity of the conflict and the role the government plays in this, it is necessary that a clear advocacy strategy be developed.

4. Clarity is needed on the role and scope of clusters in supporting joint humanitarian action in Colombia, along with their relationship to the HCT. It was noted that the policy on humanitarian reform and rollout of the clusters were not being implemented to their full potential. Agencies in Colombia continue to pick and choose areas of involvement, with the HC frequently being unable to identify reliable actors in key sectors. This has resulted in a weakening of the 'provider of last resort' concept for some
clusters. In their current state, the thematic groups are largely for information exchange, with little strategic coordination, assessment or planning. In addition, there is poor vertical coordination and communication across the national, provincial and district-level cluster/thematic groups.

5. **Current humanitarian architecture should be revised to streamline coordination and ensure predictable leadership across all cluster and cross-cutting themes.** The humanitarian architecture in Colombia is a direct recommendation of the McNamara mission of 2006. As noted above, the HCT has made significant progress in implementing the 2006 mission recommendations, no small achievement given the extremely complex and challenging humanitarian situation in Colombia. However, the cluster architecture has since evolved globally and the context in Colombia continues to change rapidly. These new developments should be taken into account, and an effort made to reduce layers and simplify structures.

6. **A higher degree of inter-cluster and cross-sectoral coordination should be established.** This is especially important as needs-based responses do not always fall into sectors that humanitarian agencies have designed to coordinate their activities. At present, both inter-cluster coordination and that of cross-cutting issues is ad hoc and limited. Both elements need to be more closely integrated into both inter- and intra-cluster mechanisms.

7. **Efforts should be made to minimize obstacles to coordination created by tensions between the humanitarian agenda and the GoC’s stabilization agenda.** This is important in order to foster recovery and to identify mutually supportive solutions to sometimes opposing issues (i.e. preserving protection with recovery actions). UN agencies and multi-mandate non-governmental agencies have been implementing programmes moving beyond traditional humanitarian assistance, however, it was noted that there was a “rebranding” of existing activities which fit more into the early recovery concept. This rebranding does not add any notable value to what is taking place, and in the specific case of Colombia, it seems to confuse the humanitarian agenda and messages. Moreover, there is a danger that in designating existing activities under early recovery may jeopardize joined-up approaches with clusters (i.e. protection) on issues such as durable solutions to IDPs’ livelihoods.

8. **There is a need to more actively identify areas for constructive collaboration with the Government of Colombia in regards to humanitarian action.** In particular, this might include strengthening the emergency response capacity of government partners in a targeted manner. Notwithstanding the Government’s agenda which is sometimes at odds with that of the international humanitarian community, much of response
provision remains with the national authorities and will continue to be as such.

Functioning in such a highly politicized and conflicted setting such as the one in Colombia requires discipline on the part of all actors. For the HCT in Colombia, this means efforts need to be taken to insulate humanitarian action from divisive politics; translated into operational terms, this means greater coherence in the humanitarian response, better coordination, common strategies and interventions. In a situation where the role of the state assumes its responsibility as provider of first and last resort (as opposed to the cluster leads) but, by its actions, compromise humanitarian principles, it is important to show results by coordinating effective humanitarian action and in turn establish a robust evidence-based dialogue with Government.

**Other significant findings**

In the absence of a common framework for strategic discussions and joint planning and action, the humanitarian response has been fragmented and, at times, mutually unsupportive. The 2006 implementation of the cluster approach model designed for sudden onset crises does not reflect the needs of the Colombia context and has resulted in poor articulation between needs and response. In addition, there is a weak fragmented coordination framework with state institutions and civil society.

*On Leadership and the role of the HCT:* The mission noted a fragmented Humanitarian Country team, with reported ad hoc participation of heads of agencies and NGOs in meetings. Some of the HCT members clearly questioned the value added of the humanitarian coordination space. Further to this, the processes for discussion and decision-making rely on the presence of the HC who seems overstretched. There are no accountability mechanisms in place within the HCT but also vis-à-vis the field/regional HCTs.

*On donor community engagement:* Given the lack of CAP/CHAP in the country or any strategic framework, donors interviewed felt a real handicap in advocating for funding in their capitals and making more visible the humanitarian situation in Colombia. In addition, donors are not systematically engaged in the strategic discussions of the HCT particularly those regarding humanitarian space and access.

*On protection issues:* The complexity and pervasiveness of protection issues in the Colombian context calls for an overarching protection framework to be put in place to guide the implementation of humanitarian activities in the country, protection and non-protection alike. Due to the vast protection issues present in Colombia and the high level of sophistication among actors working in the country, protection related activities extend well beyond the realm of the humanitarian arena and that
of the Protection Cluster, which is manifest by the number of assistance activities with protection objectives that are being implemented by non-protection actors.

On coordination and clusters: The introduction of the cluster approach in Colombia seems to have improved the understanding of sector/thematic group leadership as the HCT has assigned lead agencies as responsible for overseeing individual technical groups. However, significant issues related to capacity to establish and maintain thematic groups persist and exhaustion over the meetings lacking focus and clear agendas. Thematic group lead coordinators do not have adequate institutional backing or support from their respective institutions. In addition, the relations between the technical group lead agency and the cluster partners are not consistent and inter- and intra-cluster coordination is disjointed and at times unpredictable. This is partly due to limited capacity and uneven commitment from the HCT, cluster lead agencies and within OCHA Colombia.

There is concern about poor or non-existent vertical coordination and communication (reporting lines) across the national and regional cluster groups and between HCT and clusters. With the possible exception of the Protection cluster, the Telecommunications cluster, and the Education and Health sub-clusters respectively, there were ambiguities about the role of the clusters and the value added of humanitarian reform. In other parts of the community, there was evidence of lack of simple meetings management and process. Information management and support for this is generally weak across the entire Colombia response.

Communication mechanisms between the HCT, the clusters, field Working Groups/roundtables and Government structures are not systematic. While Colombia has a significantly well functioning emergency response on natural disasters (UNETE), there is little to no links between the UNETE and the HCT on systematic lessons learned and/or sharing of best practices.

On partnerships: While a large number of UN agencies and INGOs participate in inter-agency coordination through the clusters/thematic groups, it was observed that few national or local NGOs participate actively in clusters. There seems to be reason for this, mainly the fact that the political nature of the majority of these groups could compromise neutrality of humanitarian action. However, no additional mechanisms, such as a semi-annual or annual forum, have been established to regularly interact with these groups at an inter-agency.

On cross-cutting issues: Capacity and knowledge on gender in humanitarian action is weak. Although there is a strong will to integrate gender issues, there is little knowledge within the IASC on how to do it. The national Gender Roundtable is not formally integrated in the IASC structure, and has little focus on humanitarian action. Most interventions are implemented without a coordinated approach, and they are in the majority either targeted actions for women’s empowerment or on sexual violence against women. This in turn is a result of a lack of implementation of basic prerequisite activities, such as the collection of sex- and age-disaggregated
data in needs assessments. On a governmental level, Acción Social informed it has a gender approach to its programmes, but admitted it does not know how to mainstream gender in certain areas of work, such as shelter and livelihoods. The need for gender-specific interventions were specifically mentioned during the mission’s visit Montes de Maria, while efforts to prevent and response to GBV, including sexual violence, is identified as being critical countrywide.

IV. Recommendations and Roadmap

The Health Cluster was not represented in the Inter-cluster coordination mission although the team had a chance to solicit inputs from PAHO. In addition, both the Director of the PAHO Office in Colombia and the cluster coordinator participated in the deliberations of the half-day workshop at the end of the mission. Human rights and de-mining concerns were raised as a concern by key informants during the mission but these issues have not been addressed sufficiently in the recommendations below. Finally, funding and lack of resources were key concerns raised both at national and local levels by all actors. While acknowledging that funding is an important catalyst and incentive for coordination, the mission noted that funding and mobilization of resources was a secondary issue to that of the development of a common strategic framework. From a common platform, other processes could then be developed, such as joint fund raising initiatives.

Notwithstanding, these gaps can be considered when planning the deployment of the follow-on Inter-Cluster Coordination Mission.

The key recommendations as developed by the Inter-cluster Coordination mission were grouped along the conceptual elements of humanitarian reform commonly used by the HCT in Colombia, notably

1) **strategy development and identification of core advocacy concerns** and contribution to broader advocacy initiatives of the HC and other actors

2) **predictable leadership** for the overall response and in key sectors;

3) strategic **coordination and improved accountability** between and within each sector; and

4) **strengthened partnership** and inclusion of key humanitarian partners

These recommendations are followed by a Roadmap in which each recommendation is matched by an associated “mini” plan of action with an indicative time frame within which the suggested recommendation should be implemented and the responsible actors attributed.
A. Strategy development and identification of core advocacy concerns

1. **Identify key humanitarian priorities with a view to revitalizing the dialogue with the Government of Colombia and ensuring that humanitarian assistance is carried out in an impartial manner.** In the short-term, and taking advantage of the opportunity of a new Government, the HCT should identify key humanitarian priorities with a view to revitalizing the dialogue with the Government of Colombia and ensuring that humanitarian assistance is carried out in an impartial manner and that humanitarian staff and activities continue to follow an approach guided by humanitarian principles, notably in view of Presidential Directive 001 and where UN-led humanitarian interventions could be interpreted as supporting Government-led civil-military strategies.

2. **Develop a Common Humanitarian Framework for action on the basis of a comprehensive multi-sector needs assessment and shared analysis of the humanitarian crises in Colombia.** The HCT must develop a Common Humanitarian Framework for Action, underpinned by a comprehensive multi-sector needs assessment and shared analysis, which could be used as a tool for priority setting, common messages, joint programming and action and where feasible, joint funding-raising. In developing the Framework, a common methodology must be identified with a view to creating a common basis for measuring and comparing levels of vulnerability, risks and local capacities.

3. **Develop a joint advocacy strategy based on the Common Humanitarian Strategic Framework which would provide visibility to the humanitarian situation in Colombia.** Based on the Framework for Action, the HCT must develop a joint advocacy strategy which would provide visibility to the humanitarian situation in Colombia, particularly at the global level where it was noted there was a knowledge gap as to the magnitude of the humanitarian crises in Colombia.

4. **Review status of the Government’s budget contribution in support of humanitarian interventions, and ensure that ‘do no harm’ principles are applied throughout humanitarian and development responses.** While the Government of Colombia is the main source of funding of humanitarian assistance, the “humanitarian” budget includes socio-political and development programmes which are not humanitarian. The HCT should review the status of Government’s budget contribution in support of humanitarian interventions, and ensure that ‘do no harm’ principles are applied throughout humanitarian and development responses.
5. **Take a more proactive approach to involving the donor community and non-traditional actors in informing and engaging them in the issues of Colombia’s humanitarian crisis.** In line with the need to make Colombia’s humanitarian situation more visible, the HCT should take a more proactive approach to systematically involve the donor community and non-traditional actors (private sector, academic institutions) in strategic discussions on humanitarian issues (policy frameworks, strategic plans, relative institutional priorities, situation assessments. Etc)

B. Predictable Leadership

1. **Establish a robust dialogue internally within the HCT on all humanitarian issues based on mutual accountability.** The Humanitarian Coordinator and the Humanitarian Country Team must take proactive measures to design common approaches and clear ways of working which uphold impartial humanitarian action. In this regard, the HC needs to establish a more transparent and robust dialogue internal within the HCT on all humanitarian issues and hold all HCT members accountable to agreed ways of working based on humanitarian principles.

2. **Strengthen channels of communication with field (regional teams) and convey clear messages on strategic issues, thus forming the basis for a common position and messaging vis-à-vis the Government, at both national and field levels.** The HCT through the Cluster Coordinators must strengthen channels of communication with the field offices and convey clear messages on strategic issues (humanitarian access, crop fumigations, civil-military issues etc) which would, in turn, be the basis for common position and messages vis-a-vis the Government.

3. **Focus immediate efforts at revitalizing the humanitarian dialogue with external partners (including Government) and expediting development and finalization of Common Strategic Framework through designation of a Humanitarian Deputy for a time-bound period.** The HC and HCT must focus efforts on the revitalization of the humanitarian dialogue with the new Government. To do so, the common strategic humanitarian framework must be expedited. To carry out this focused task, it is recommended that the HC in close collaboration with the HCT designate a Humanitarian Deputy for a period of 6 to 12 months to oversee the process of the development of the humanitarian framework and expedite the implementation of the recommendations of the Inter-Cluster Coordination mission report.
4. **Strengthen leadership on human rights issues.** The HC and HCT must strengthen leadership on human rights issues by developing common strategy on key human rights and humanitarian messages formulated on the basis of a better context analysis.

5. **Strengthen cluster leadership.** Leadership of clusters needs to be strengthened by adhering to a more disciplined application of the responsibilities listed in the Generic Cluster Terms of Reference.

6. **Prioritize cluster capacities relative to ongoing humanitarian response.** Cluster Coordinators need to review their capacities relative to the ongoing humanitarian response and prioritize additional staff in accordance with the type of assistance most appropriate in each phase of the humanitarian response.

7. **Strengthen HCT and Cluster capacity to address cross-cutting issues.** The capacity of the HCT and Clusters to address cross-cutting issues need to be strengthened. Links to existing mechanisms in Colombia concerning cross-cutting issues such as gender, mental health and psychosocial support, disabilities, aging, MRM, de-mining, etc. need to be strengthened through designation of focal points responsible for mainstreaming cross-cutting issues in strategic discussions of the HCT. Where possible, dedicated resources should be identified and allocated for this task.

C. Strategic Coordination and Improved Accountability

1. **Ensure clarity on roles and responsibilities of the HCT and in particular clarity on the role of Cluster Lead Agency within the HCT.** The Humanitarian Coordinator should ensure that there is clarity on the roles and responsibilities of the HCT, in accordance with the IASC Guidance for Humanitarian Country Teams, endorsed in November 2009 and on roles and responsibilities of the Cluster Lead Agencies. Once clarified, Mutual Accountability Frameworks should be established between the HC and Cluster Coordinators, to ensure accountability to the Humanitarian Country team as a whole.

2. **Rationalize current cluster architecture with a view to simplifying structures, reducing layers and ensuring predictable leadership.** On the current cluster architecture in Colombia, the HC and HCT should rationalize the current structure with preference to having clusters with clearly defined leadership and accountabilities and reflecting the priorities of the context (‘needs-based’).
3. Implement an action plan for improving cluster coordinator communication with the field (regional teams) with a view to ensuring their systematic involvement in strategic and operational discussions within the HCT. The HCT and Cluster Coordinators need to implement an action plan for improving communication with the field. The objective of this action plan would be to ensure systematic field engagement and/or inputs into both strategic and operational discussions at national level (inter-cluster discussions as well as HCT policy level discussions) as well as guidance to field clusters on key issues from the national level.

4. Implement recommendations on individual clusters as attached in this report. Recommendations have been made on individual clusters and they are attached to this report. Once approved by the individual clusters, the recommendations should be implemented and the HCT should monitor the implementation of those recommendations.

5. Prioritize and render more effective inter-cluster coordination at both national and field levels, with a view to support the HC, HCT and clusters in carrying out their work. OCHA must prioritize and render more effective the inter-cluster coordination mechanism at national level. Where appropriate and based on needs of the context, an inter-cluster coordination mechanism should be set up at field level.

6. Improve information management by tailor-making information, analysis and response and disseminating these reports more routinely. In an effort to improve information management, the OCHA Colombia based portal needs to be, as a matter of priority, maintained, updated and disseminated routinely. Situation analyses emerging from the portal also need to be linked to a response analysis thus providing a decision-making tool for the HCT. Information on situation reports should be Cluster-based.

7. Strengthen support from Global Cluster Leads to National Leads. Global Cluster Leads must take a more proactive stance in their support to the national leads, rather than waiting for national leads to request support.

D. Strengthened partnership and inclusion of key humanitarian partners.

1. Define and sustain a consistent space for dialogue with all humanitarian actors. The HCT should define and sustain a consistent space for dialogue and partnership between humanitarian coordination structures, the GoC and other actors (UN, NGOs, civil society).
2. **Map coordination mechanisms with a view to clarifying links with humanitarian structures.** OCHA Colombia should map coordination mechanism at national and sub-national levels, going on to clarify links with humanitarian structures.

3. **Improve INGO participation.** The HC and HCT should improve INGO participation in the humanitarian country team, clusters, and field coordination mechanisms.

4. **Improve coordination with affected populations.** Field Coordination Groups should improve coordination with indigenous and afro-descendants communities through their traditional authorities or representative organization that take into account the principles of free, prior and informed consent.