Introduction

The Global Nutrition Cluster (GNC) was established in 2006 as part of the Humanitarian Reform process, which aimed to improve the effectiveness of humanitarian response programmes by ensuring greater predictability, accountability and partnership.

The Global Nutrition Cluster (GNC) is a partnership that includes international NGOs, the Red Cross and Red Crescent Movement, UN organizations, donors and individuals and is based around the principles of equality, transparency, responsibility and complementarity. There are three levels of engagement within the GNC with the following groups: partners, observers and the Nutrition Cluster Coordinator Team at country level. The GNC also has a Strategic Advisory Group (SAG) that provides strategic guidance to the GNC Coordination Team and the GNC. Additionally, specific task forces are established when needed to work on specific tasks or to guide and support the implementation of the Work Plan. The vision of the GNC is to safeguard and improve the nutritional status of emergency affected populations by ensuring an appropriate response that is predictable, timely and effective and at scale.

This report provides an update on the key achievements, challenges and some recommendation on areas that requires improvement. Where possible, the report also provides evidence on GNC’s contribution to increasing effectiveness in humanitarian emergencies, with specific reference to enhanced country level Nutrition Cluster Coordination. The key achievements are presented along the lines of the four strategic pillars of the Global Nutrition Cluster and the corresponding objectives, activities and results under each strategic pillar.

Content:

1. Partnership, communication, advocacy and resource mobilization
2. Capacity development in humanitarian coordination
3. Operational and surge support to country clusters
4. Information and knowledge management
GN C achievements September 2014 – October 2015

Strategic Pillar 1: Partnership, communication, advocacy, and resource mobilization

Objective 1: To strengthen existing partnerships and support the development of new partnerships to enhance accountability within a coordinated response

Key Partnership engagement with GNC partners - A small-scale funding agreement concluded with HelpAge International resulted into the development of a joint gFSC/GNC operational framework for Accountability to Affected Population (AAP) and the development of a nutrition-specific guidance on AAP for country clusters. The draft AAP framework will be presented at the GNC Annual Meeting in October 2015 and discussed and endorsed by the cluster partners. Once endorsed, this AAP framework would be adapted by clusters countries to guide the implementation of commitments on AAP and core people-centered related activities throughout the Humanitarian Programme Cycle (HPC).

A partnership agreement with Save the Children USA to support the review of the role of the GNC and nutrition country clusters in technical NIE work was initiated. This review is being done through consultation with the country cluster coordination teams and the global cluster partners, including NGOs, institutions, UN agencies and donors. The result of this initiative will be presented at the GNC Annual Meeting in October 2015 for discussion and this work is expected to shape the strategic priorities of the GNC and would also enable the collective GNC partnership to organize itself to better support country clusters on technical issues. The second component of the partnership agreement with Save the Children USA involves the updating of the Nutrition Cluster Handbook and the TOR for this assignment has already been developed and the post advertised on the GNC website and other networks, in order to attract candidates with the right experience.

In October 2014, the GNC-CT partnered with ACF-UK to develop a GNC Advocacy Strategy, in consultation with the cluster partners. The second component of this work is the development of an advocacy toolkit for country clusters, again in consultation with partners and country cluster coordinator. While another partnership agreement which has commenced with ACF-UK is for the review of IM tools used in country nutrition clusters as well as the IM tools and development of a IM training packages. Additionally, another partnership was developed with ENN to support country cluster documentation and learning.

In 2015, GNC established a new partnership with RedR-UK to support the updating of the GNC training package on cluster coordination in order to align the NCC and cluster partners training packages with the Cluster Coordination Competency framework developed by the CLA. The second component of this partnership is the development of a roster of twelve trainer to facilitate all the GNC trainings (i.e. NCC training and country cluster partner’s orientation packages).

While the partnership that has been established with four GNC partners, namely IMC, ACF, Save the Children-UK and WV since 2013 for the formation of the GNC Rapid Response Team has been maintained, it was further harnessed and strengthened during the reporting period.

In addition to the partnerships listed above that involved fund transfer from the CLA to GNC partners to implement GNC work plan, four cluster partners have also taken an initiative under a consortium led by IMC to fundraise for the establishment of a technical surge to support technical surge needs in emergency countries and funds for this initiative has been received by the consortium of the GNC partners.

The wider GNC partnership fully participated in
GNC working meeting discussions, while the GNC Strategic Advisory Group (SAG) continues to provide strategic direction to the work of the GNC-CT. Inter-Cluster work on Food Security and Nutrition - The Global Nutrition Cluster continues to engage with relevant global clusters to strengthen inter-cluster linkages, in particular with the global Food Security Cluster, where the leadership for the implementation of the existing Work Plan developed for inter-cluster work between GNC and gFSC has been agreed. Five cluster partners, namely WFP, FAO, ACF and Help Age as well as the gFSC Support team and the Global Cluster Coordination Team, have agreed to take those activities forward. This is a very important achievement, given the joint workplan lacked leadership for implementation for over two year.

Under the umbrella of a similar inter-cluster collaboration between the GNC and gFSC, a guidance for country clusters on inter-cluster linkages has been developed and shared with the Country Nutrition Cluster Coordinators and the Country Food Security Cluster Coordinators to guide inter cluster work at country level. The guidance will allow country clusters to effectively and proactively build inter-cluster/inter-sectoral linkages at every stage of the Humanitarian Programme Cycle (HPC) and ensure a coherent and comprehensive response.

Objective 2: To communicate effectively and transparently with partners and nutrition stakeholders through email, in teleconferences and in meeting

The GNC maintained a relatively good level of communication with cluster partners, but given the presence of an effective SAG, partners were only consulted on issues that required collective input. This has resulted in reduced email flow to the wider GNC partnership and more streamlined and targeted sharing of information.

The Working meeting of the GNC partners took place in March 2015 in Geneva, where partners critically reviewed the progress made towards achievement the implementation of the WP and identified implementation bottlenecks and solutions to overcome them, while a number of activities were prioritized for implementation in 2015. Partners also identified activities that should be included in the 2016 workplan or those that needed to be developed further by the SAG and costed by the GNC-CT. Funding arrangements around priority activities were also discussed, including discussions on the operationalization of the fundraising strategies for the GNC. However, not much progress has been
made around the implementation of the fundraising strategy, thus an implementation plan needs to be developed, and progress monitored by the SAG and the GNC-CT in the coming months.

Effective communication channels have been established with the country cluster coordination team through the establishment of a **GNC Help Desk** that started providing systematic technical and coordination assistance, including mentoring and orientation to NCCs and IMOs. This has allowed the GNC-CT to maintain a platform for communication, experience exchange and feedback with country clusters, through monthly conference calls, attended by countries. The Help Desk also holds bilateral need-based teleconferences with individual NCCs and IMOs which are conducted in English and French.

Another channel that facilitates sharing of updated information on the global level activities with cluster partners and country clusters and that provides space for NCCs and IMOs to share their experience is the quarterly GNC News Bulletin. Since September 2014, the GNC-CT published three issues featuring outcomes and recommendations the March 2015 GNC partners’ working meeting. The bulletin also provided highlights of the GNC capacity building activities, while the findings and recommended action following cluster coordination performance monitoring in selected countries as well as updates from L3 countries and deployment of RRT and updates on any new UNICEF and IASC guidance are also provided in the bulletin.

**Objective 3: To ensure that relevant advocacy messages are developed and appropriately communicated to enhance policies, coordination and response capacity**

**Advocacy Strategy and Tool Kit development** – The development of an advocacy Framework for global cluster and the advocacy toolkit for country was identified by the GNC partners as a priority area back in 2012 and further reaffirmed in the 2014-2016 strategic objective. The Advocacy Strategic Framework aims to provide high level overall strategic direction and focus for GNC advocacy efforts by ensuring linkages with relevant initiatives and support cluster partners in developing common messages to leverage impact for nutrition in emergency work. These initiatives will ensure that the Global Nutrition Cluster develop relationships that enhances cluster accountabilities at international level, which will ultimately support country cluster accountabilities.

Following a face to face and web-based consultation with the GNC partners and with nutrition cluster coordinators in March 2015, a draft Nutrition cluster advocacy aim, objectives and board areas to be consider when developing the specific activities were developed. This was followed by a 3-day workshop organized by the GNC-CT and ACF-UK in July 2015 that brought together the GNC SAG members, SUN Secretariat and the GNC-CT to further develop the advocacy framework. Three overall goals were developed for the advocacy framework and these are as follows: 

**Goal 1) focuses on effectiveness of the humanitarian response. Goal 2) is about resource mobilization for nutrition in emergencies and Goal 3) seeks to foster the accountability of humanitarian and development agencies towards preparedness, response and transition to safeguard the nutritional needs of emergency affected population ensuring that the existing expertise and technical capacity on nutrition in emergencies contributes to inform and shape nutrition policies.**

Each advocacy goal is supported by objectives and results, specifying the changes required to contribute to the achievement of the ‘bigger’ goal. For each result, the Framework assesses the state of play and key challenges, opportunities and the nutrition cluster role to date. Sample activities were also proposed, although the framework recommends that activities should be further developed and agreed as part of annual planning processes. The final draft of the GNC Advocacy Strategy will be presented at the GNC Annual Meeting in October.
2015 for partners’ review and endorsement. The work on the development of the country level advocacy toolkit will follow and a further consultation in a side meeting with the NCCs and IMOs at the GNC annual meeting is expected to shape the development of the toolkit.

**Promotion of Linkages between Scaling-Up Nutrition (SUN) Movement and the Nutrition Cluster** - In order to better communicate the complementarity between SUN and the Nutrition cluster, a document was developed jointly by the SUN Secretariat and the GNC Coordination Team with inputs from the country nutrition cluster coordinators. This document will be used by both SUN countries and Nutrition cluster countries to support continued dialogue on the promotion of emergency preparedness and response in the costed national plans of action for nutrition in countries where SUN and Cluster overlaps.

**Influencing IASC Policy and Guidance development** - Being based in Geneva where all the IASC discussion on policy and guidance takes place, the GNC-CT consistently represented GNC partners in IASC policy and guidance discussions, and key document release by the IASC in July 2015 and shared with the GNC partner are the MIRA Guidelines, the revised Cluster Coordination Reference Module (CCRM), and the revised Humanitarian Programme Cycles and Emergency Preparedness documents. These new guidance will form the basis for the GNC handbook update.

**Objective 4: To strengthen capacity of global and country clusters to mobilize resources for improved coordination and response.**

**Fundraising to Support Global level cluster functions** - UNICEF as the Cluster-Lead Agency continues to support the GNC Coordination Team (GNC-CT) based in UNICEF Emergency Programmes Office in Geneva, by managing the Global Cluster Coordination Team (GNC-CT), fundraising for the cluster activities and providing funds for the two positions, - GNC Coordinator and Deputy GNC Coordinator. The GNC Fundraising Strategy developed in September 2014 has unfortunately not been operationalized and this will need to be revisited by the GNC partners and the SAG. For global level, despite the fact that the current fundraising strategy is not operationalized, the GNC-CT successfully managed to secure EUR 2.0 million from ECHO to sustain its surge coordination and IM capacity – the Rapid Response Team - and to support capacity building activities for the cluster. Additionally, US$ 960,000 was secured from DFID in September 2015 to maintain the GNC Rapid Response Team in 2016. A consortium of NGOs led by the IMC also successfully secured an additional US$ 992,000 which is directly provided by the donor/OFDA to the consortium lead agency for the establishment of a technical surge support to cluster countries and other emergency countries in the areas of IYCF-E, CMAM, nutrition assessments and WASH in Nutrition activities as well as communication for development activities.

**Support to country level advocacy and Fundraising Efforts** - The development of country level guidance for resource mobilization remains outstanding, however, the GNC-CT continued to advocate to the CLA to allocate funding for a longer-term cluster coordination positions. These efforts have resulted into the recruitment of longer term cluster staff in South Sudan, Mali and Syria for cross boarder operation being under recruitment. As a result of the continued advocacy, coupled with the recently released guidance for UNICEF country representatives, 43% of cluster countries have dedicated NCC and 33% have dedicated IMO. The following graphs demonstrate the proportion of dedicated and double-hatting NCCs and IMOs in countries with clus-
ter / sector coordination mechanisms.

The double-hatting arrangement is used mainly in countries where humanitarian coordination is merged with sector coordination or in countries that are currently not in L3 emergency.

As a result of the GNC scoping mission to Ukraine, the CLA has been able to raise funds for the Nutrition sub-cluster but the recruitment of the dedicated cluster staff remains a challenge despite continued advocacy.

Strategic Pillar 2: Capacity development in humanitarian coordination

Objective 1: To strengthen nutrition sector and cluster coordination mechanisms to ensure effective nutrition coordination functions are available at country level.

Strengthening of Competencies for Cluster Coordination and Information Management - The GNC-CT as a part of UNICEF-led Clusters and Areas of Responsibility (AoR) participated in the development of the competency framework/strategy for cluster coordinators and information managers. A comprehensive list of 36 competencies was developed and agreed with the Global Cluster Coordination Unit and these were presented to the GNC partners in March 2015. The GNC-CT incorporated few priority competencies, such as Leadership, Communication and Achieving Results in the revised training package for cluster coordinators and there is an ongoing work to develop a standardized induction package to assist in a systematic orientation of new NCCs and IMOs in all agreed competencies and key GNC coordination and other technical resource.

Enhancing Global Talent Pool for Capacity development in Coordination – Through partnership with RedR UK, a pool of 12 trainers is to be established for the GNC, where a total of 105 cluster members in selected priority countries are to be targeted to enhance cluster partner engagement at country level and competencies in coordination enhanced for up to 90 cluster coordinators from priority countries by June 2016. To-date, six trainers have been selected and three of them delivered training for cluster coordinators in Bangkok (Sep-Oct 2015).

Improve quality of NCC training tool and increase pool of trained NCCs - In January-March 2015, the GNC-CT updated its training packages on cluster coordination and cluster approach awareness for cluster partners to include latest guidance by the IASC and the GNC. However, delays in the development of the GNC Information Management (IM) Toolkit has further resulted into the postponement of the development of the comprehensive IM Training Package to 2016. Nevertheless, two regional trainings on cluster coordination were conducted in Nairobi and in Bangkok for English-speaking countries targeting 61 participants. This contributed to improvement of knowledge on IASC protocols and skills in coordination and leadership amongst the NCCs, IMOs and Government officials from South Sudan, Ethiopia, Somalia, Sudan, Myanmar, Bangladesh and Syria cross-border response. Four newly recruited GNC Rapid Response Team members were also among the participants. The knowledge and skills acquired during the courses will be directly used in the daily functions the respective clusters coordinators or during the surge to establish new clusters. In addition, Government and UNICEF staff leading nutrition sector coordination in a countries prone to natural disasters or at risk of deteriorating nutrition situation such as the Philippines, Vanuatu, Fiji, Cambodia, Vietnam and Kenya also benefitted. The new knowledge and skills would allow this group of participants to contribute to Nutrition in Emergency coordination activities in support of gov-
An orientation on the cluster approach has been also conducted for cluster teams and partners in Yemen, Guinea and Malawi immediately after they were declared as Level 2 or Level 3 emergencies. Additionally, web based orientation session was provided to the cluster in Chad, so in total, since September 2014, 105 cluster partners have been trained on cluster approach and this group included UNICEF and other UN agencies’ staff, Government employees and NGO and standby partners’ staff. Various cluster partners who are hosting RRTs have also conducted web-based orientation on cluster approach for their staff, namely ACF, IMC, Save the Children and World Vision targeting a total of 140 staff trained by the Rapid Response Team (RRT) members. This has contributed to better understanding on the cluster approach in the partner organization and it has further strengthened partnership on the work of the cluster with these partners.

Towards improved country cluster transitioning of Cluster - A review of nutrition cluster transition plans/processes in priority countries to identify and address capacity building gaps for Gov’t and Cluster Lead Agency (CLA) capacity has been completed, lead by UNICEF. The case studies were completed from Ethiopia, Pakistan, Kenya and the Philippines with preliminary suggestions on checklist/benchmark to guide transition work at country level. Consolidated case studies and the transition checklist/benchmark will be presented to the partners at the GNC Annual Meeting in October 2015. The findings from the case studies endorsed the view that transitioning from an internationally led cluster to a nationally led coordination mechanism is a complex process, dependent on the context, capacity for both coordination within the CLA and government. The document provided overall recommendations that will be further reviewed and filed tested in cluster countries to enhance smooth transitioning of clusters to government-led sectors.

Updating of GNC tools and Guidance - A comprehensive review and the update of the Nutrition Cluster Handbook led by the Save the Children-USA
Handbook will ensure latest IASC documents that were issued following the Transformative Agenda would be reflected.

The updating of the Harmonised Training Package (HTP) was also an activity in the GNC work plan, however, lack of funding prevented the GNC partners to undertake a comprehensive revision of the HTP and its translation into French and Arabic languages this year. In consultation with the cluster partners in March 2015, the HTP update has been deferred to 2016, and a review of the HTP modules to identify areas that may require an update was recommended. This review was completed by a GNC RRT where areas requiring revision and update have been identified in all the HTP modules and this would be a great start for the update in 2016. The update of these two GNC tools will also address the issues identified in the online survey conducted by the GNC-CT on the usefulness and appropriateness of the first edition of the Cluster Handbook and the HTP. Overall, 80% cluster coordination team and cluster partners use the Nutrition Cluster Handbook, while about 69% of cluster partners including NCCs use the HTP, mainly for conducting trainings, orientation, to facilitate the development specific training materials, etc.
Strategic Pillar 3: Operational and surge support to country clusters

Objective 1: To ensure effective, augmented nutrition coordination/IM support for emergency response

Rapid Response Team Support to Country Clusters
– During the reporting period, the Rapid Response Team of the GNC has expanded from five to six members. Currently, the GNC surge mechanism for nutrition coordination support has three Nutrition Cluster Coordinators (hosted by ACF, IMC and SC-UK) and three Information Management Officers (ACF, WVI, UNICEF), thanks to ECHO and DFID financial support. Each RRT member is expected to be deployed to support coordination or information management in a country for up to 50% of their time, and utilize the remaining time contributing to the GNC and host agency activities. The expansion of the team allowed for simultaneous deployment of the NCC and IMO to ensure coherent support for both

<table>
<thead>
<tr>
<th>Indicators for the RRT project</th>
<th>Since Jun 2013</th>
<th>Since Sep 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of RRT members</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Number of RRT deployments</td>
<td>29</td>
<td>14</td>
</tr>
<tr>
<td>Number of countries benefited</td>
<td>11</td>
<td>7</td>
</tr>
<tr>
<td>Percentage of requests approved</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Average days from country request to Steering Committee decision</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Average days from Steering Committee decision to RRT arrival</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>Average deployment duration (weeks)</td>
<td>7.2</td>
<td>6.7</td>
</tr>
<tr>
<td>Total number of deployment days</td>
<td>1429</td>
<td>668</td>
</tr>
<tr>
<td>Number/percentage of missions exceeding 8 weeks</td>
<td>9/31%</td>
<td>2/14%</td>
</tr>
<tr>
<td>Number/percentage of missions exceeding 12 weeks</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
cluster coordination and information management. Given the challenging work environment of the RRTs, maintaining RRT in this position for more than 2 years has been a challenge. Out of the original 5 RRT recruited by in 2013, only one RRT member Anna Ziolkovska, ACF is now hosted by UNICEF) has remained in the team, otherwise, all the first group of RRT finished their contracts (Angeline Grant, ACF; Paul Wasike, SC-UK and two others). The current RRT members include Anna Ziolkovska, UNICEF; Grace Omondi, IMC; Hanno Guillaume, ACF; Mohammad Faisal, ACF, Simon Karanja, WVI and Jemal Seid Mohammed, SC-UK (who finished his contract as of September 2015 and he is joining UNICEF Yemen office as a NCC and SC-UK is in the process of recruiting his replacement).

From July 2013 to date, the RRT members conducted a total of 29 missions to 11 high priority countries, out of this, 14 deployments were to seven emergency countries in the past year only. The countries supported from September 2014 to date are Yemen, South Sudan (both level 3 emergencies), Nepal, Ukraine (both level 2) and Malawi, Somalia, Sudan. The total number of deployment days amounts to 668 days and with an average duration of deployment of 6.7 weeks per country or per deployment.

Utility of non-deployment times by RRTs - During the non-deployment times, RRTs are expected to contribute 25% of their time to the GNC work at global level, contributing to GNC WP under the GNC-CT supervision, while the remaining 25% is to be spend on the work of the host agency. During the reporting period, 10% of the non-deployment time was spent on pre and post deployment work that typically involves background reading and communication with country pre-deployment, remote support to countries after deployment, pending the arrival of a dedicated cluster staff or another surge staff, briefing of new cluster coordination staff as well as the finalization of end of mission reports. 27.1% of the none deployment time was spent on GNC WP which included the development of the Information Management toolkit, consolidation of best practices on contingency planning in nutrition clusters, updating of the Humanitarian Response Plan tips for nutrition clusters, providing remote coordination and information management support to nutrition clusters, assisting the GNC-CT in drafting of the GNC bulletins and updating the GNC website. Additionally, 16.7% of the none deployment time was used on capacity building of the agency staff in cluster approach and nutrition in emergencies in more than 20 countries.

GNC-CT in country or remote support to Country Cluster Coordination platforms - From September 2014 to date, the GNC-CT provided remote support to 10 countries (Ethiopia, South Sudan, Somalia, Afghanistan, Sudan, Nigeria, Nepal, CAR, Mali and Somalia) in conducting Cluster Coordination Performance Monitoring (CCPM) exercises. This included in-country support visits to three countries, namely South Sudan, Ethiopia and Afghanistan to facilitate the validation of the CCMP finding in and support the countries in developing plan of action to improve on cluster function that are not delivered
well. The CCPM exercises allows country cluster partners to take a critical review of how cluster coordination performs its core functions and to agree on a set of practical activities to be implemented by the collective to improve the performance if and when required. On average, partners rated the performance of country nutrition clusters from “Satisfactory” to “Good”, but the cluster functions that continues to be requiring improvement are advocacy, preparedness and contingency planning. In countries where CCPM were conducted more than once, namely in Somalia, Afghanistan and South Sudan, there is a clear trend of continuous improvement in a way those clusters perform. GNC-CT will closely monitor the progress of the action plan implementation in these countries and provide support as and when needed. Three more CCPM exercises in Yemen, Chad and for the cross board operation in Syria are scheduled to take place during the next 6 months and similar support would be provided.

**Surge Support through Standby Partner deployment** - Additional surge support has also been sought through UNICEF’s standby partners (SBP) to fill the gap for surge request which could not be met by RRT deployment capacity. From September 2014 to date, a total of 10 requests for NCCs were received and submitted to SBP agencies, of which, 4 were filled for Sudan, Nigeria, Ethiopia and Nepal, however, one request for Malawi, has not yet been filled, awaiting for SBP response. In addition to this, one request for a WASH/Nutrition Cluster IMO and another request for a multi cluster IMO were received and both of those request were filled for Ukraine and Nigeria respectively.

**Evaluation findings of the GNC support to country Cluster Coordination platform (capturing both RRT and GNC-CT support)** - A formal evaluation of the support provided by the Global Nutrition Cluster to national coordination platforms was conducted during the reporting period. The evaluation’s objective was to assess, systematically and objectively, the relevance, effectiveness, efficiency, connectedness, coverage and sustainability of the GNC RRT support to countries in L-3 emergencies and chronic crises, and the relationships with the partners hosting the RRTs. The secondary focus of the evaluation was to review the broader GNC-CT operational and surge support to country coordination platforms. The evaluation covered the period from March 2012 to September 2014 and captured both deployment and none deployment periods during. The evaluation found the GNC RRT system as being relevant, appropriate and essential. It also highlighted challenges faced by the GNC partners in the countries, which included the lack of capacity for nutrition in emergencies (NiE) across the board. It recognized that surge support through the RRT mechanism is a short-term solution to addressing capacity gaps in cluster coordination and the need to address capacity issue more sustainably was highlighted. Eight out of 17 recommendations of the evaluation were prioritized and a Management Response Plan (MRP) was developed for the 8 priority recommendations detailing what actions are needed to address them and by whom. The MRP were grouped around actions to be taken to **Support to GNC RRT Systems by GNC-CT and RRT host partners, actions to be taken by the GNC-CT to support to Cluster Coordination Platforms (countries) and Actions that needs to be taken by the cluster-lead agency.** Additionally, during the reporting period, the GNC-CT also provided support
for the recruitment of NCCs for South Sudan and Yemen and this has contributed to identification of NCCs who have the right level of experience and technical knowledge to lead cluster coordination at country level.

**GNC support to country Cluster Coordination platforms through a Help Desk** - The GNC Help desk was established in June 2015 to provide regular support to NCCs, IMOs and Rapid Response Team members in all cluster countries. The GNC Help Desk is directly managed by the GNC Coordination Team with the following objectives: 1) Provide new and existing nutrition cluster coordinators at country level with technical assistance on coordination/IM and NiE during different cluster milestones (HNOs, SRPs, Flash Appeals, transition plans, etc.), as well as mentoring and remote training/orientation sessions on specific cluster-related topics, (2) To establish a platform for regular and systematic communication, experience exchange and feedback with country nutrition clusters. This is being done through monthly and bilateral teleconferences with NCC and IMOs. The HelpDesk also supports the reviewing of documents such as the country Humanitarian Response Plan. So far the Help Desk provided induction or mentoring for newly appointed nutrition cluster coordinators in Afghanistan and Syria cross boarder operation, orientation of partners in Guinea Conakry, Chad and Yemen, on cluster approach and ad hoc technical support to 3 countries focusing on assessment methodologies and nutrition supply-related questions. Inputs on HNOs and HRPs were also provided for the following countries, Kenya, Syria cross boarder operation. The Helpdesk office also worked in collaboration with the GNC-CT on the identification of countries where CCPM could be undertaken.

**Tailored IMO Conference call for technical IMO discussions, cross cluster learning and experience sharing** - In addition to the monthly NCC calls, a regular IMO conference calls have been established, facilitated by RRT/IMOs to address IM related discussion and information exchange. The calls focused on providing updates to cluster countries on new developments and best practices in information management from the GNC-CT, IASC, and Global Inter-cluster Information Management Working group. While being a forum for information exchange between countries in information management, it is recognized that a face-to-face information sharing would be the most effective way for such exchange, therefore the GNC-CT is organizing a side meeting for IMOs during the 2015 Annual GNC Meeting.

**Objective 2: To enable the country cluster staff to access required technical support**

**GNC partner contribution to technical surge support in cluster countries and emergency countries** - A project for the surge technical capacity by consortium of GNC partners namely, IMC, ACF and SC has been funded by OFDA. The individual consortium agencies are in the process of hiring four Technical Surge Advisors, for IYCF-E, Assessment, CMAM, and Behavior Change Communication/WASH in Nutrition and a full time technical program manager. The project is built upon the experience of the RRT project and it includes similar time allocation arrangements with technical surge advisors being deployable 50% of their time to large-scale sudden onset L3 and other humanitarian emergencies. Once implemented, this project will contribute greatly into strengthening the technical capacity of country clusters and other emergency countries in the areas of assessments, analysis, and will support cluster coun-

---

**Priority countries for the GNC Helpdesk**

<table>
<thead>
<tr>
<th>Language</th>
<th>Priority I</th>
<th>Priority II</th>
<th>Priority III</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>10</td>
<td>9</td>
<td>5</td>
<td>24</td>
</tr>
<tr>
<td>French</td>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>2</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL PER PRIORITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>15</td>
<td>10</td>
<td>36</td>
</tr>
<tr>
<td>TOTAL COUNTRIES</td>
<td></td>
<td></td>
<td></td>
<td>36</td>
</tr>
</tbody>
</table>
tries to effectively plan, implement and monitor nutrition cluster-specific and nutrition sensitive interventions with the technical quality required. In order to ensure complementarity of resources, especially as UNICEF also has recruited additional surge support for IYCF-E, a discussion on the management modality of the technical survey mechanism will take place during a side meeting at the GNC annual meeting in October 2015.

Strategic Pillar 4: Information and Knowledge Management

Objective 1: To ensure country level clusters have the harmonised tools and guidance required for effective information management

The IM/KM strategy was endorsed and is now guiding the work of the GNC under strategic pillar 4. The IM work continued to be overseen by the IM/KM taskforce consisting of the GNC partners and co-led by ACF and ENN.

Global level support in consolidation Information Management guidance and tools – A consultant recruited and managed by ACF-UK conducted an extensive review of available IM tools and but unfortunately, this process ended by with nearly hundred tools and while tools that were missing were also identified. Moreover, the toolkit did not include nutrition-specific tools except for existing tools which were already developed by the GNC-CT. As the list was so long for busy and field based IMO to plough through, in an overly time constrained environment of emergencies, the GNC-CT organised a workshop to review the toolkit content, attended by the GNC-CT, GNC Helpdesk Officer, all RRT IMOs, the South Sudan IMO and ACF-UK. During this meeting, the entire content of the toolkit was reviewed, prioritised and the nutrition-specific tools that were missing were identified, resulting into only 27 core IM tools. The work to develop the missing IM tools of the 27 list is currently being conducted by the three RRT IMOs and is expected to be finalised by the end of November 2015. Once developed, all tools will be translated into French and potentially to Arabic. The operationalization and the use of the IM Toolkit by country clusters early next years is expected to strengthen and improve IM functions in cluster countries and will also help to “jump-start” nutrition cluster information management functions in newly activated clusters. The development of the IM training packages has been postponed, pending the finalisation of the IM toolkit. However, during the same workshop, an outline of the training package was agreed upon and an agreement was also reached on the way forward with regards to the development of the training package.

Objective 2: To strengthen systems and capacity for documenting and sharing information and knowledge/ learning in effective cluster response at country and global level

Through the partnership agreement with ENN, six countries, namely Philippines, Yemen, Ukraine, Somalia, Bangladesh, and South Sudan have developed case studies that highlight experiences and learning around nutrition coordination and Nutrition in Emergency response within a cluster setting. The selection of the thematic areas was done through survey monkey and countries thereafter identified the topic to which they can contribute some learning and these themes addressed in the case studies include governance, partnership, preparedness, capacity development, and nutrition information systems. Case studies will be presented and discussed at the GNC meeting and are expected to be completed by the end of 2015.

For additional update on the GNC work, kindly visit GNC website (www.nutritioncluster.net).