

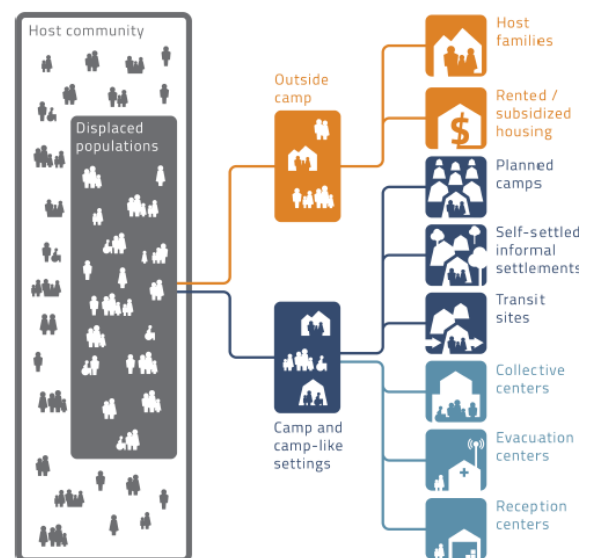
CCCM Cluster PiN and Severity Calculation Methodology

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This methodology outlines the necessary steps to determine the number of people in need (PiN) and the severity of need in the Camp Coordination and Camp Management (CCCM) Cluster. It is designed for full compatibility with Joint Intersectoral Analysis Framework (JIAF) 2.0 methodology and provides the CCCM Clusters PiN and Severity inputs for the intersectoral analysis part of the JIAF 2.0 process¹. The concept of PiN for the CCCM Cluster can be loosely defined as; the number of internally displaced persons (IDPs) in a collective site or displacement setting and surrounding affected population² and projections/trends in the next 12 months³ above a specified minimum population threshold⁴.

PiN steps:

1. **Select relevant population group(s)** for CCCM PiN from the list of population groups defined at the intersectoral-level, with accountability and endorsement of CCCM Cluster Coordinator. While context specific, this list typically contains IDPs, returnees, and host/non-displaced communities. CCCM's focus is primarily on IDPs living in sites but can also include a portion of the host community if required.
2. Determine the **site typology and minimum population thresholds**. The typology described in the Minimum Standards for Camp Management and Cluster Coordination Toolkit should be used as a primary reference, acknowledging that terminology and variations on types are common across different contexts. Ensure your country's site typology is clear, understood and used by data collection and response actors, with an agreed-upon minimum threshold for how many individuals or households represent the lower limit of what constitutes a collective site or displacement setting in your country context.
3. **Aggregate** the population estimates of all sites meeting the criteria in step 2 at both the required HNO administrative level⁵ and country level to calculate the overall CCCM PiN. Consider sites with a high probability of receiving a significant influx of new IDPs or large numbers of returning individuals. If site-level data is not



¹ This methodology note will be accompanied by sample tools/templates.

² Relevant to CCCM ABA and mobile approaches

³ Seasonal, conflict, evictions and context specific indicators.

⁴ An unusual characteristic of CCCM needs, in contrast to other sectors, is that they typically apply to just IDP population groups and are time-linked to events and periods of displacement.

⁵ At the beginning of the HNO process an administrative level must be chosen as being the lowest unit of analysis, to provide consistency for the intersectoral analysis. Both the geographic units (administrative) and population units (groups) must be consistently applied across all clusters.

available, any CCCM PiN figures at any admin-level up to the admin-level of intersectoral analysis can be used.

Severity steps:

4. Use the CCCM Cluster Severity Reference Table to **select relevant descriptions** for your context and **link them to appropriate indicators** from your context. Indicator choices depend on data availability, response stage, and data quality. Set thresholds for degree-type indicators that best represent the descriptions in each severity phase. Indicators may be linked to a description in one phase or to descriptions across multiple phases.⁶ Multiple indicators can be mapped to individual phase descriptions, which can support triangulation of evidence, but realizing that there is a possibility of tied/conflicting evidence.
5. **Assign a severity level to each site** by checking the site's indicator/description pairs against the criteria for each severity phase, described in the CCCM Cluster Severity Reference Table. If data is not available at the site-level, assign the severity at the lowest feasible admin-level.
6. **Aggregate/pivot the site populations at the required HNO administrative unit-level** to show the population estimates for each severity phase. Add in the remaining IDP population not in sites for each of these admin units and decide the proportion that should be in severity phases 1 and 2.^{7,8} Calculate the percentage of IDPs in each severity phase and use the 20% rule to choose the area's severity scale.

This methodology aligns to the concept of absolute severity scales of the JIAF 2.0 and uses the same 5 phase scale. While this provides a benefit of making severity consistent across space and time, even across countries, a downside for countries where CCCM needs are relatively less severe, is the possibility that most or all the CCCM PiN may appear in the same severity phase (3), limiting the use of the severity scale for targeting or prioritization exercises. The use of this approach can, if needed, be complemented using additional approaches for targeting, where the sites in a particular phase, in our case 3, can be further segmented, based on additional targeting criteria.

Once finalized and sent to OCHA, each cluster's PiN and severities feed in to the intersectoral process, to provide overall PiN and intersectoral severity. Each of these steps involve convergence of evidence and flagging to identify outliers. In cases where this intersectoral process flags CCCM PiN or severity for a particular area, the cluster can check their methods and data for this location, and revise (or confirm) the PiN/severity as needed.

⁶ Magnitude based (yes/no) indicators e.g. "Can the site population access services outside the site" typically apply to individual severity phases. Degree-based indicators, e.g. "Proportion of site population that experience difficulties in undertaking at least one of the 6 basic functioning activities (WG-SS)", using thresholds, can be applied across multiple severity phases, providing the same concept is described in each.

⁷ For verification, check that the sum of the populations, and percentages, add up to the baseline (IDPs).

⁸ Distributing non camp or camp-like IDPs across severity 1 and 2, can be done by whatever criteria that are deemed and available. While it has no impact on PiN or targeting, it is useful to show the complete distribution of PiN across severities.

Annex 1: CCCM severity alignment table

NOT PiN		PiN		
1. Minimal	2. Stressed	3. Severe	4. Extreme	5. Catastrophic
<i>Minor or no Sectoral deprivation</i>	<i>Borderline and stressed Sectoral deprivation</i>	<i>Elevated Sectoral deprivation</i>	<i>Extreme Sectoral deprivations</i>	<i>Sectoral collapse</i>
<p>IDPs outside a collective site or displacement setting, above a specified minimum population threshold</p> <p style="text-align: center;">+</p> <p>Access to sustainable rented/subsidized/owned housing or accommodation in host community with low risk of near-term displacement secondary displacement to camp or camp-like settings.</p>	<p>IDPs outside a collective site or displacement setting, above a specified minimum population threshold</p> <p style="text-align: center;">+</p> <p>Access to rented/subsidized/owned housing or accommodation in host community with medium risk of near-term displacement to camp or camp-like settings.</p>	<p>IDPs in a collective site or displacement setting, above a specified minimum population threshold</p> <p style="text-align: center;">+</p> <p>One of the following:</p> <ul style="list-style-type: none"> - Limitations to the availability of or access to non-humanitarian life-saving services. - Limitations to systems and services for participation, complaints and feedback, information sharing and coordination of services. - Risks due to physically, socially, culturally inappropriateness of site. 	<p>IDPs in a collective site or displacement setting, above a specified minimum population threshold</p> <p style="text-align: center;">+</p> <p>Two or more of the following:</p> <ul style="list-style-type: none"> - Restrictions on freedom of movement. - Very limited availability of or access to non-humanitarian life-saving services. - Risks to safety and security. - High risks due to physically, socially, culturally inappropriateness of site. - Low probability of near-term safe, orderly, dignified, voluntary returns, reintegration or resettlement. - Very limited or absence of systems and services for participation, complaints and feedback, information sharing and coordination of services. - Site demographics contain higher proportion of vulnerable populations (elderly, children, disabilities, ethnic minorities). - High risks due to site susceptibility to hazards (fire, landslide, flooding, cyclone, etc.) 	<p>IDPs in a collective site or displacement setting, above a specified minimum population threshold</p> <p style="text-align: center;">+</p> <p>Two or more of the following:</p> <ul style="list-style-type: none"> - Extremely limited to no freedom of movement outside of the site. - No availability of or access to non-humanitarian life-saving services. - Widespread life-threatening risks to safety and security. - Widespread life-threatening risks due to physically, socially, culturally inappropriateness of site. - No probability of near-term safe, orderly, dignified, voluntary returns. - Site demographics contain extremely high proportion of vulnerable populations (elderly, children, disabilities, ethnic minorities etc.) - Widespread imminent life-threatening risks due to site susceptibility to hazards (fire, landslide, flooding, cyclone, etc.)