**South Sudan CCCM Capacity Building Strategy 2015**

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| Country | South Sudan |
| CCCM Coordination Agencies | UNHCR and IOM |
| CCCM Co-coordinator | ACTED |
| Advisory group | Norwegian Refugee Council South Sudan (NRC),  CCCM Global Cluster |
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| Strategy status | Endorsed | Effective date | Next revision |
| Yes No |  | July 2015 |

**I. Background/Context**

On 15 December 2013, violence broke out in South Sudan’s capital Juba, quickly spreading to Jonglei, Unity and Upper Nile states. Fighting continued despite a 23 January agreement to cease hostilities. So far, more than 1.4 million people have been forced from their homes[[1]](#footnote-2) and tens of thousands have been killed. An upsurge in ethnic targeting has created large potential for revenge attacks. Millions are at risk of death from violence, famine and disease. By December 2014 is estimated that 4.1 million people will have to be assisted in 2015.[[2]](#footnote-3)

Inside South Sudan, displaced people are scattered across more than 170 locations[[3]](#footnote-4), some of which have now hosted people for more than six months. The states that are highly affected are Jonglei, Upper Nile and Unity, whilst Lakes and Central Equatorial has been a host to those displaced from within the state or other adjacent states. The highest concentrations of displaced people are in Akobo and Nyirol counties in **Jonglei**, Fashoda and Malakal counties in **Upper Nile**; Payinjar and Rubkona counties in **Unity**; and Awerial in **Lakes**.[[4]](#footnote-5) The majority of displaced population – around 90%[[5]](#footnote-6) - is living among host communities, in spontaneous sites, collective centres or planned camps, whereas more than 100,000[[6]](#footnote-7) people have fled to **8 UNMISS (United Nations Mission in South Sudan) bases**, where they live in protection of civilians (PoC) sites. Some 49,000 people have made the UN base in Bentiu their temporary home[[7]](#footnote-8), while the town is deserted. Poverty, floods and food insecurity may also draw more people to the UN bases where up to 120,000 people could shelter by year end.[[8]](#footnote-9) The composition of these sites has fluctuated as towns have changed hands between the conflict parties. Violence between communities inside the sites could increase if the fighting outside continues.

Therefore, the dimension and complexity of South Sudan emergency requires the right knowledge, skills and attitudes to effectively meet people needs. Stakeholders’ competence and response capacity should be built based on best practice in order to encourage an effective, relevant and accountable response to displaced populations. The key partners for this project are national and local authorities, UNMISS personnel, UN and NGO staff, police forces, camp managing agencies, service providers, IDP leaders and host communities structures.

In CCCM, capacity building goes hand in hand with humanitarian response, this builds competency in the sector and helps in mitigating risks. For this purpose, the CCCM cluster established comprehensive coordination structures in each state with a focal agency on the ground. In 2014, NRC took the responsibility of building the capacity of the CCCM stakeholders in site management at national, state and site level.

The training needs initially identified targeted four main groups: humanitarian agencies, relevant government counterparts, UNMISS personnel and IDPs community leaders. In 2014, the CCCM cluster deployed a number of CCCM capacity building experts to assess needs, develop a training strategy, contextualize global training tools and roll out training and coaching activities based on participants’ needs. The main results of these efforts produced a state by state training package, 107 people trained from all groups targeted and Camp Management working plans as a result of coaching sessions with Camp Management Teams of different sites.

In addition the lead trainer used a direct capacity building methodology along with the CCCM State level focal points. This methodology met the context challenges of South Sudan which includes high staff turnover, no time to sit in trainings, the need for practical tools to address urgent needs, and receiving a comprehensive understanding of the CCCM operational framework. This approach also allowed the trainer and field staff to focuses on short technical sessions and with customized tools tailored to different CCCM stakeholders’ operational needs.

However, trickling down capacity building efforts to meet the needs of local actors dealing with displaced communities at county and payam level, it is a challenge that CCCM stakeholders are struggling to address. As the situation evolves in-country, the cluster identified the benefits of a capacity building approach that strengthens national capacity, increases accountability to displaced and host communities, facilitates information management and communication between local administration, humanitarian actors and affected communities and ensures coordination.

During 2014 most of the trainings have targeted administrators (UNMISS and national authorities), managers, coordinators and service providers engaged in PoCs’ operations at State level (Juba, Malakal and Bor). Only CCCM stakeholders working in self-settled sites in Awerial have benefited from CM training.

The training outcomes from the capitol Juba, and the key towns in Malakal, Bor and Mingkaman sites has increased the field demand for camp management skills and follow up support. Based on these results, the CCCM cluster has decided to decentralize the capacity building response, and focus on State level support and follow-up targeting State focal points, site managers, service providers, government officers (when feasible), UNMISS staff, community leaders and site committees, as all need a common understanding of roles and responsibilities. In addition this approach will ensure that protection is mainstreamed across planning, design, implementation, monitoring and evaluation of the site response; as well as assist in developing community participation strategies at the site level; and integrating cross-cutting issues into site response (in particular, age, gender, diversity, safety and security, mental health and psychosocial support and environment).

Given this unique and challenging humanitarian and operational context, this document attempts to identify the necessary steps and way forward in order for the CCCM sector to be as efficient and effective as possible at building the capacity among key partners while serving beneficiary population for 2015. As a ‘living document’ this strategy should be discussed, updated and revised frequently with involvement of relevant CCCM stakeholders as the humanitarian and specific operational contexts evolve.

**I1. Objectives, scope and approach**

**II.1 Objectives**

Based on field requirements, the phase three of the capacity building strategy (year 2015) will have two main objectives:

1. The delivery of two **Training of Trainers (ToT)** to build partners competence to adapt, prepare, facilitate and monitor CCCM trainings at both State and site, county or payam level

*This overall capacity objective would be underpinned by specific objectives and outputs presented in a separate project document.*

1. The creation of a **Capacity Building Rapid Response Team** that is able to provide guidance and support CM processes by adapting tools and methodology.
2. By the end of 2015, to have **a coordination structure** in place in order to gradually turn over the CCCM capacity building programme to National Government Counterparts.

**II.2 Scope**

Hinged on the CCCM and Protection cluster joined statement related to the “Provision of assistance to displaced populations in flux during ongoing conflict” and also NRC experience in Leer County (Unity State), it is critical widening the CCMM training scope (beyond PoCs areas) to facilitate the provision of assistance and services outside formal camps and in different settings and also support CCCM stakeholders to identify different options to address the complexity of displacement in South Sudan.

In this sense NRC South Sudan will be taking the responsibility on building the capacity with focus outside the PoCs, whereas IOM will continue to strengthen the CCCM Capacity within the PoCs.

In PoC areas, the focus of this strategy is to strengthen the development of community participation strategies at site level to support Camp Management actors to address the challenges faced by the leadership structure. In this sense, encouraging humanitarian actors to empower communities to take more responsibility in site management issues that affect their own future should be prioritise. At the moment, a new training approach for communities living in PoCs is being piloted in Juba. This method aims to contribute to the development of a comprehensive framework to work with affected communities nationwide, addressing the complexity of tribal and sub-tribal cultures, the conflict dimensions, including the understanding of population with Post-Traumatic Stress Disorder.

In Non PoC areas, the focus will be strengthening CM core competences (coordination, information management -in particular registration and data collection, information sharing and dissemination, monitoring, community participation and capacity building) of different actors engaged in the provision of assistance and services to the affected populations.

**II.3 Approach**

1. **The Training of Trainers**

Building CM competence in PoCs and Non PoCs areas will require the delivery of two Trainings of Trainers (ToTs) to empower key actors that are already familiar with the context in South Sudan. One Training of Training will be held in February and the other one in the second half of the year, after the revision of the present strategy.

The aim of these ToTs will be to build training and coaching knowledge, skills and attitudes of pre-identified national and international actors on the ground so they can provide guidance and facilitate CCCM trainings according to specific context needs. A training package and other practical tools and adapted materials are already being developed to address the particularities of the South Sudanese displacement situation.

The ToTs will include four training candidates:

1. **State Focal Points**: will be the main targeted group for the first ToT.
2. **Staff from National and International NGOs/Agencies** doing either Camp Management or protection/community participation activities/provision of services: this group will be made up of senior/crucial national staff from national and international NGO’s.
3. **National Government counterparts**: In this case, the National Government counterparts for CCCM are the officers from Relief and Rehabilitation Commission (RRC). In the case of areas that are being controlled by Opposition parties, the officers from South Sudan Rehabilitation Agency will be addressed locally.
4. **Other groups of interest**: It may include UNMISS personnel from the Relief, Reintegration and Protection Department (RRP) and staff working with the DTM (Displacement Tracking Matrix).

All of them will have to fulfil with the following criteria:

* To have a working contract with their organization for no less than 3 or 6 months during 2015
* To sign an engagement letter committing themselves to carry out training that will lead to the implementation of the work plan. This will require developing an intricate ToT agenda that would demand concrete actions and required training sessions to be taken in order to enhance the CCCM capacity at State, County, Payam or site level.[[9]](#footnote-10)

In order to ensure a higher commitment and the best accuracy in the submission of applicants, the Capacity Building Focal Point has already helped to identify partners and possible candidates. In addition, the Cluster has taken steps to advocate for the importance and critical work that the ToT will fulfil. These measures go hand in hand with the enlargement of the network of partners that could be key for the Cluster, in terms of either the role they are fulfilling or/and the location in which they are operating, while contributing to help to sustain the capacity building networking within the country.

1. **The Rapid Response Team**

A Rapid Response Team (RRT) based on the Area Rapid Response Model (ARRM) will be established to support State focal points and CM practitioners on the field with guidance, technical advice and tools. The RRT members will also roll out training and coaching sessions on demand in locations where no trainers are available. This will allow the CCCM Cluster to have a wider response regarding demands and needs about CCCM capacity. This team will be made up of three staff from each of the Co-lead Organizations (IOM, UNHCR and ACTED) and shall work in close collaboration with NRC and IOM Capacity Building Focal Points. Apart from the capacity building functions, the RRT shall respond to other CCCM outfield requirements where they will work in close collaboration with REACH and DTM staff taking part in Inter-Agency Rapid Assessments (IRNAs).

1. **CCCM Coordination Structure**

Humanitarian interventions in South Sudan have been ongoing for three decades or more, and while the state holds primary responsibility to address these issues, humanitarian agencies have tended to be at the forefront of the response. While state actors will likely need logistical and material support to undertake their responsibilities, there is no reason that they cannot take on a larger leadership role that is supported by the humanitarian community. In this sense, the CCCM Cluster will work to strength the coordination structure in order to pave the way for National Authorities to gradually take over the responsibility of CCCM Capacity Building programme.

1. **Capacity Building Focal Points**

On the other hand, another component of the strategy is to maintain the position of the Capacity Building Focal Point (CBFP) at Juba level. This position will be performed by two people, one hosted by NRC to keep the focus on the capacity building operations outside PoCs and the other one hosted by IOM, focusing on capacity building inside PoCs.

Taking into account the two different focuses that each CBFP will have, the Terms of Reference for this position should include:

* Ensure smooth coordination between NRC, IOM and the CCCM Cluster
* Develop/enhance/update the national level strategy based on state level strategies
* Ensure consistency and coherency across States and National Capacity Building strategies
* Collaborate with material development, as well as oversee the consistency in training packages specific for PoCs/outside PoCs and adapted for each State, whichever is applicable
* Develop monitoring and evaluation tools for capacity building training sessions
* Conduct National level trainings for different stakeholders if required
* Design and co-facilitate the 2 planned ToTs
* Represent CB in CCCM meetings as required
* Provide technical support to Cluster and trainers based at field level
* Keep record, report, share and disseminate State level training outcomes
* Identification and consolidation of partners to reinforce and enlarge the capacity building networking in the country
* Co trained trainings at State level, as required
* Facilitate mentoring/coaching sessions for trainers at State level and for CCCM stakeholders

In the case of trainers at State level, the ToR will state:

* Contribute to state capacity building strategy for CCCM
* Conduct CB learning needs assessment at state and county level, as required
* Conduct state and county level trainings (with national partners) according to strategy
* Provide mentoring and coaching sessions to CCCM stakeholders or/and national training partners
* Develop practical tools based on context needs in order to support CM partners to raise living standards both in PoC site and out of PoC areas (self-settled sites)

**III. Expected activities and outputs/outcomes**

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| Level | Activity | Output/Outcome | Timeframe |
| National | Delivering of ToTs | 50 key actors trained and empowered to deliver CCCM Trainings at State and Site/County/Payam level | February and 2nd half of the year |
|  |  | Specific training package for South Sudan context | January (1st ToT) and 2nd half of the year (2nd ToT) |
|  | Developing of monitoring and evaluation tools to measure CB project impact | M&E Tools specific for South Sudan context | Year 2015 |
|  | Provision of technical support delivered by CBFP and RRT | Trainers at State/Site/County/Payam level have technical support needed to implement CCCM Trainings | Year 2015 |
|  | Identification and consolidation of CCCM Cluster Partners to enlarge the CB networking of the country | CCCM Cluster network of partners enlarge and consolidated | Year 2015 |
|  | Enhancement of the Cluster Coordination Structure | Coordination Structure in place | End of year 2015 |

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| Level | Activity | Output/Outcome | Timeframe |
| State | Carrying out CB Needs Assessments | CB Strategies developed by State Focal Points | End of March 2015 |
| State/County/Payam/Site | Delivering of tailored CCCM Trainings | CCCM stakeholders involved in the humanitarian response have improved knowledge of CCCM concept and practices. | March-December 2015 |
|  | Delivering of coaching and mentoring sessions | CM Teams, Community Leaders and other relevant CCCM stakeholders increase their capacity regarding specific subjects related to CCCM | January-December 2015 |

**IV. Monitoring and Evaluation of the strategy**

As described previously, this strategy is designed to be a living document, discussed, debated and updated on a regular basis. Ideally a formal revaluation with CCCM sector partners should be conducted every six months in order to adapt to changes in the security environment and displacement situation. Each year, intervention strategies should be recalibrated and, if necessary, redefined in order to adjust to operational priorities, with an additional ‘planning’ year added to give focus to sector’s long term vision.

**V. Annex**

1. ***List of actors identified for participation***

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| Organization | Type | Activities | Geographical scope |
| Africa Humanitarian Action (AHA) | International | CCCM, Health | Pariang (Unity) |
| DRC | International | CCCM, Shelter & NFI,Protection | Rubkona (Unity), Malakal, Maban, Melut, Baliet (Upper Nile), Aweil Centre, North and South (NBeG) |
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1. UNOCHA South Sudan Humanitarian Snapshot, as 1st December 2014 [↑](#footnote-ref-2)
2. *Ibid* [↑](#footnote-ref-3)
3. UNOCHA South Sudan Displacement Location and Figures, 15 November 2014 [↑](#footnote-ref-4)
4. *Ibid.* 1 [↑](#footnote-ref-5)
5. Information taken from UNOCHA South Sudan situation map, November 2014 [↑](#footnote-ref-6)
6. *Ibid.* 2 [↑](#footnote-ref-7)
7. *Ibid.* 1 [↑](#footnote-ref-8)
8. According to projections of CCCM Cluster in South Sudan [↑](#footnote-ref-9)
9. During the CCCM retreat of 2014 a capacity building assessment was conducted. These soft skills were all prioritized by participants including those from South Sudan: Setting up a committee; Increasing participation women and girls; Establishing vulnerability guidelines; Site planning for protection; Distributions; Gender analysis; Prevention of GBV in camp settings; Survivor centered approaches; Complaint mechanism; Commitments to Gender; Core manager skills; Community participation; Outside camp coordination; Vulnerability assessment ;Registration and confidentiality of data; Grievance committee and feedback; DRR and shelter; Peace initiatives for managers; Trafficking; DTM mainstreamed; Mapping; Training for GBV in CCCM; Assessing land; Adult learning techniques; Conflict resolution among IDPs; National authorities; Assessments and (Impact assessments) [↑](#footnote-ref-10)