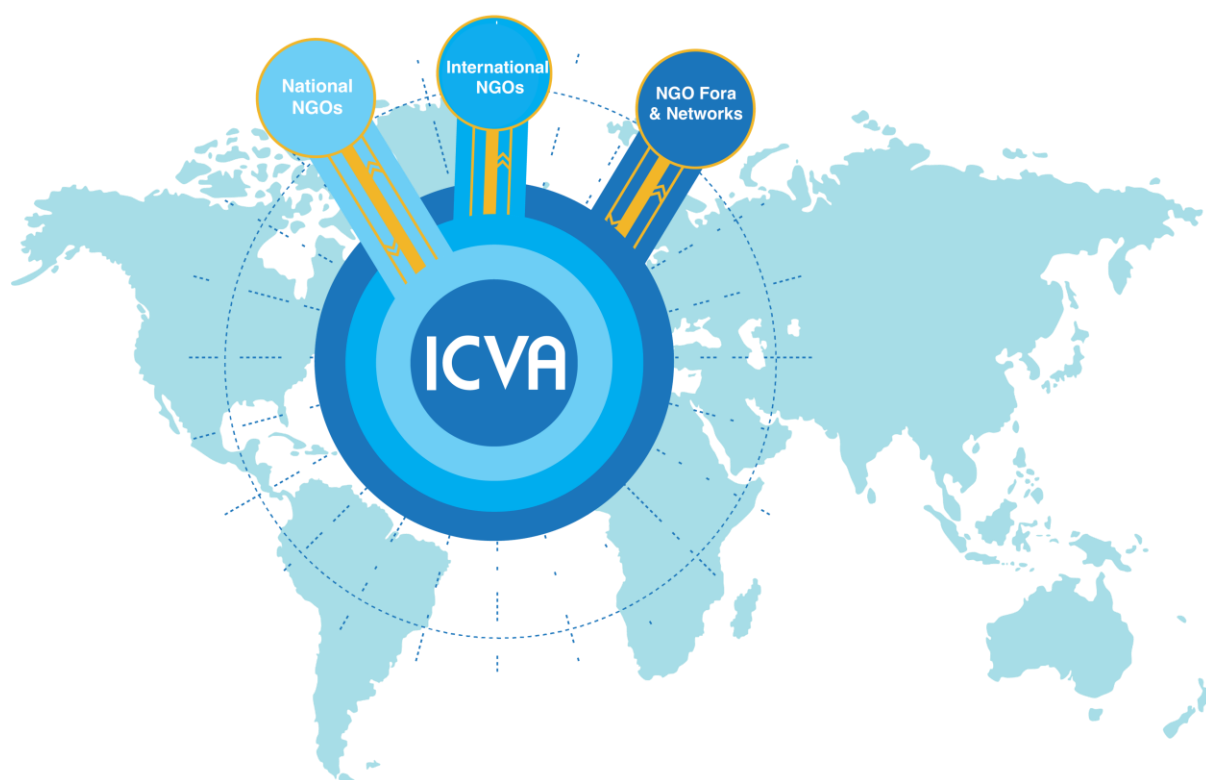# NGO Guide to the:

Humanitarian Country Team Terms of Reference

MAY 2025

The ICVA Demystifies series: Humanitarian Coordination

About ICVA

ICVA is a global network of over 160 non-governmental organisations whose mission is to make humanitarian action more principled and effective by working collectively and independently to influence policy and practice.

Acknowledgements

This paper was authored by Albert Philip Burger, ICVA's NGO Policy and Practice Coordinator. The author would like to thank the NGO Fora and OCHA for their insights and contributions to the substance of this paper.

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Introduction

The Humanitarian Country Team (HCT) is the most senior inter-agency leadership body of an international humanitarian response in a country. A well-functioning HCT plays a pivotal role in ensuring the humanitarian response is effective and principled. This document, aimed at NGO Country Directors, clarifies the role and responsibilities of the HCT and its members, and how NGOs can best engage with and influence the HCT process.

Note: to understand the structure itself – refer to the companion paper: "[Understanding and influencing the IASC System at Country-Level](#)".

Based on ICVA's experience supporting NGO HCT participation in more than 30 countries, excerpts of the standard HCT Terms of Reference have been selected and commented, with the aim to:

- ☐ Highlight requirements for effective HCT participation.
- ☐ Identify practical considerations requiring the attention of NGOs and NGO Fora.
- ☐ Provide links to reference documents (policy, tools and guidance) to guide HCT members in their role.
- ☐ Where useful, clarify the expectations related to some items.

Readers are strongly encouraged to read the full HCT Terms of Reference document for themselves.[1] The views in the commentary are ICVA's and should not be seen as official IASC positions.

Terms of Reference - Commented Excerpts

Purpose

"The HCT's overall goal is to ensure that inter-agency humanitarian action alleviates human suffering and protects the lives, the livelihoods and dignity of people in need."

ICVA comments:

The overarching goal of the HCT is a more efficient humanitarian response that better responds to the needs of the affected populations. As such, HCT discussions should be **evidence›-based and result-oriented**.

It is also the role of the HCT to **raise the profile** of the crises it manages, both within the humanitarian systems and in the public eye, and to ensure the response is properly funded.

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[1] The document is available at the following link: https://interagencystandingcommittee.org/emergency-directors-group/iasc-standard-tor-humanitarian-country-teams-hcts-february-2017.

> *"The HCT makes decisions to ensure that country-level humanitarian action is well-coordinated, principled, timely, effective and efficient."*

ICVA comments:

The HCT should be **primarily a decision-making body.** While data and information-sharing and robust debates are integral to the process, decisions must be taken for the HCT to fulfill its mandate.

The lack of decision-making in HCTs is one of the most common complaints raised by NGOs. To address this, when engaging with the HC on HCT performance, NGOs should reference the **unambiguous decision-making nature of the HCT** as per the standard ToRs.

One important output of an HCT should be an **action plan.** As with all action plans, progress must be regularly reviewed. Individual actions can be assigned to HCT members, to other IASC country-level structures, or to ad-hoc working groups, but the **HCT as a whole remains accountable to overseeing their completion.**

A decision-making body can only function if its members hold each other **mutually accountable** and are willing to **commit to implementation** once a decision has been reached.

As **NGO members of the HCT represent the collective**, it can be difficult for them to commit the broader NGO collective to an action plan. Regular dialogue between the NGO HCT representatives and the rest of the NGO community is required to **ensure NGOs play their part in implementing the action plan**.

NGO Fora play a key role here. They ensure the diverse views and debates within the forum membership result in clear positions. They then articulate these positions in coordination structures, including the HCT. They also ensure the HCT decisions are shared with the NGO community and the actions taken by NGOs are recorded so they can be reported.

Composition

> *"The HCT is composed of organisations that undertake humanitarian action in-country and that commit to participate in coordination arrangements."*

ICVA comments:

As per the Standard ToR, only organisations that implement the humanitarian response can be members of the HCT. In the case of an NGO forum composed of both humanitarian and development-oriented organisations, care should be taken to ensure the forum HCT representation focuses on the humanitarian priorities of its members

(although linkages to development is still part of the humanitarian-development nexus role of the HCT).

Only organisations that commit to participating in coordination arrangements are part of the HCT. NGO representatives are not required to reflect the views of organisations who have not engaged (e.g. those unwilling to

share their data, or participate in work-sharing agreements aimed at avoiding gaps and duplication). NGO representation may, in some cases, be able to advise the HCT regarding actors that are not participating in coordination arrangements.

> *"It should include UN agencies, OCHA, national and international non-governmental organisations (NGOs) and, subject to their individual mandates, components of the International Red Cross and Red Crescent Movement. [...] Representatives of Cluster/Sector Lead Agencies represent their cluster(s)/sector(s) in addition to their organisation."*

ICVA comments:

In practice, only operational UN agencies with humanitarian activities should be present in the HCT.[2]

UN agencies represent themselves, but also the cluster(s) they lead - if any. The same goes for any NGO that is a cluster lead.

This may lead to potential conflicts of interest, and it is important to remember the dual nature of this representation and when necessary, request clarity on whether a position is taken in the name of the individual organisation or in the name of the cluster.

NGOs should always represent the wider collective rather than their own organisation. If they have a cluster co-lead role NGOs should also clarify when speaking on behalf of the cluster instead of NGOs more broadly.

The Red Cross and Red Crescent Movement (either through the ICRC or the IFRC, depending on the context) is usually present and will usually choose to attend on an observer basis only, although this does not preclude their active participation in many cases. It may participate in the debates but is not bound by HCT decisions. MSF is also often invited under the same conditions.

> *"The size of the HCT is limited, to allow for effective decision-making. Membership criteria are clear, generally accepted and well-known. The main criterion is operational relevance."*

ICVA comments:

The HCT remains a working group, and experience shows it must be **limited in size to be effective**. Twenty members total should be a rough maximum. HCTs that exceed this size are regularly reported as lacking the focus and trust

between members needed for strategic discussions and decision making.

The modalities of **selecting the NGO representatives should be decided by the NGOs themselves**, rather than

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[2] The list of IASC members and standing invitees can be found here: https://interagencystandingcommittee.org/iasc. Note that in practice, not all IASC members will be present at the HCT, this will depend on their operational footprint in a given setting.

imposed by the HC or other actors in the system.

As much as possible, the modality should be elective, giving all Country Directors a chance to hold a seat based on merit. Here too, the criteria for selection – as decided by the forum or other NGO collective - should be clear, accepted, and well-known. The ability and willingness to work on behalf of the entire collective should be a key criterion of selection. Together, **NGO representatives should represent as best possible all major sectors of intervention and main geographical** areas of operations.

"Members are represented at the highest level (Country Representative or equivalent)."

ICVA comments:

For NGOs, participation at the HCT should be at **Country Director level** only. For NGOs, representation should not be delegated to other positions within individual organisations.

It is a better practice **when electing HCT NGO representatives to also elect alternate Country Directors** that can fill seats when needed. For the NGO Forum, given the unique, role participation should be at Director level.

For UN agencies, deputies may be assigned on a temporary basis when the Country Representative is unavailable, as this ensures the agency or sector remains represented. However, this should not be a common occurrence, and any lack of high-level engagement should be discussed with the HCT or HC if it becomes too frequent.

"In addition to their own organisation, members may represent one or more organisations that are not members of the HCT, at their request."

ICVA comments:

NGOs should always represent the wider collective rather than their own organisation. If they have a cluster co-lead role NGOs should also clarify when speaking on behalf of the cluster instead of NGOs more broadly. It should be noted that without this collective representation, they will not be able to commit that collective to any HCT decision, which would significantly lower the impact and effectiveness of NGO participation. The representative nature of NGO participation as well as the modalities to select members should be made clear to other HCT members, OCHA and the HC, and clearly defined in the NGO-led election process for HCT seats.

ICVA comments:

The number of seats allocated to NGOs should be balanced - but not necessarily equal - to those allocated to UN agencies. Where this is not the case, NGOs should engage in a constructive dialogue with the HC to resolve the situation.

As mentioned above, the total size of the HCT should remain reasonable, so some negotiation may be needed. Balance can be achieved through increasing the number of seats for NGOs, or reducing the number of seats for UN agencies, for example with a focus on excluding non-operational agencies.

Maintaining this balance is an important reason regular, consistent attendance is needed for all NGO HCT members. Other HCT members, or the NGO forum, should address repeated non-attendance directly and propose alternative arrangements if needed.

"Representation from national NGOs should be particularly encouraged and supported."

ICVA comments:

The current standard HCT Terms of Reference were endorsed in 2017, and the localisation agenda has since become an important priority for humanitarian actors. As such, the **participation of national and local actors should now be seen as compulsory,** except in extremely specific cases (generally the argument for non-inclusion is in contexts where national and local actors are perceived as deeply involved in the political context and their ability to provide a principled response may be compromised).

Where national or local NGOs are not included in the HCT, NGOs should work to ensure the HC and HCT regularly reassess and revalidate this decision.

The participation of national and local actors does not necessarily increase the total number of seats allocated to NGOs. As such, in HCTs where the representation is already balanced between UN and NGOs, including national actors might require some international NGOs to forgo seats. This is in line with the commitment of international NGOs to support localisation.

"When appropriate, other institutions and agencies may be invited to participate in HCT meetings."

ICVA comments:

It should be noted that **donors' participation in HCTs is not guaranteed and the decision to invite them ultimately lies with the HC.**

NGOs are often keen to have the donors present, as they are seen as "allies" in settings where it is felt the NGO voice is not sufficiently heard by the UN. This stance by NGOs should not ignore the fact that donors will have their own agenda, which may not be fully aligned with that of the NGOs.

The HCT remains an operational, if high-level, meeting. As such, **it is vital that all members can express themselves freely on topics such as operational challenges, delays in implementation, or sector prioritisation**. As such, donors' presence may unduly impact the debates rather than promoting healthier, more transparent exchanges.

HCs are aware of the impact of donors' presence on the HCT, particularly UN agencies, and their opinions also seem to vary. Because the ERC and OCHA have been reluctant to move to formally exclude donors from HCTs, and the IASC provides little guidance on the topic, the final decision lays with the HC alone. This can be a key leadership decision, particularly for new HCs, and often puts them squarely between agencies that resent having donors 'looking over their shoulders' during HCTs, and those that see donors as valued contributors who should keep their seats.

It is important for NGOs to recognise these complex dynamics, clearly consider the implications of their own advocacy, and maintain a positive dialogue with the HC on this topic. Alternative options could be to restrict donor presence to those HCT meetings where it is most relevant, for example when the HRP is being validated, or to **have regular HCT+ (HCT plus Donor) meetings, rather than advocate for permanent donor seats**.

In rare cases, we see cases where the private sector, intergovernmental bodies, or other stakeholders may be invited to join the HCT.

Roles and Responsibilities

"The HCT function is guided by international humanitarian and human rights law, the humanitarian principles of humanity, neutrality, impartiality and independence, and the Principles of Partnership. [...] The modus operandi of the HCT is governed by the Principles of Partnership."

ICVA comments:

As the highest in-country humanitarian coordination structure, the HCT is expected to promote a principled approach throughout the humanitarian response. The HCT should therefore be regularly raising issues related to a principled approach and respect for international humanitarian and human rights law, and the challenges associated with these, and NGO representatives should come prepared to engage fully in these debates.

The **Principles of Partnership**[3] are specifically stated as being the modus

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[3] The Principles of Partnership, their translations and additional resources can be found here: https://www.icvanetwork.org/transforming-our-network-for-impact/principles-of-partnership/.

operandi of the HCT. Often referenced but not so widely used, these can be a powerful tool to call for all HCT members to build meaningful partnership and to promote a balanced leadership approach in the coordination. Following through on these should put humanitarian actors on a more equal basis and constitute a framework for quality partnerships, notably between national and international humanitarian actors.

The Principles of Partnership:

- ☐ **Equality** of the organisations - equal footing irrespective of size and power.
- ☐ **Transparency** through dialogue, which increases the level of trust.
- ☐ **Result-oriented approach** for effective humanitarian action.
- ☐ **Responsibility** – ethical obligation to each other when committing to deliver activities.
- ☐ **Complementarity** - the diversity of the humanitarian community is an asset notably local capacity.

"Working in support of the HC, the HCT has the following responsibilities:

a) Provide a shared strategic vision for collective humanitarian action in-country which is set out in a common strategic plan (the Humanitarian Response Plan or equivalent)."

ICVA comments:

While the HCT has the responsibility for the final HRP document, in practice it validates decisions that have been taken at other levels: at the need assessment stage, at each cluster level, where the initial needs overview has been developed as well as the initial targeting; and at the ICCG, where the data has been collated and prioritisation has been applied to provide a cross-sectorial answer. As such, effective NGO participation in the process needs to start at the cluster and ICCG levels (see

"[Understanding and Influencing the IASC system at Country Level](#)").

It should be noted that **while the HRP is meant to provide a collective vision for a strategic response, in practice, it more often represents a patchwork of** activities resulting from individual mandates and interests. The IASC system is currently heavily engaged in processes to clarify needs and define boundaries on the humanitarian response planning.

b) "Oversee the Inter-Cluster Coordination Group (ICCG), sub-national coordination bodies and other groups that are part of the inter-agency coordination architecture in-country."

ICVA comments:

The HCT, as the lead IASC structure in-country, **oversees all other IASC** **coordination structures**. It has the power to mandate those structures, but

in return should be ready to provide guidance and support when requested.

The HCT also shapes and formalises the subnational structures - there are no standard terms of reference for structures at the subnational level - and it is important for all HCT members to clearly define how the roles and responsibilities are to be divided between the national and the sub-national level, how the structures will communicate, and how they will function (for example, sectoral coordination versus area-based).

This overseeing function is not formalised in a hierarchical link: the HCT does not manage the other structures as a body. Instead, decisions and feedback are often passed through OCHA, as the agency in charge of all coordinating structures. As such, it is important for each member to ensure their own

organisation communicates internally on the decisions taken. Where OCHA might instruct their head of field office following an HCT decision, it is important for NGOs to similarly instruct their area managers, and vice versa for field offices wishing to bring topics to the attention of the HCT.

The ICCG, as an advisory body to the HCT and the link between the operational coordination provided by the clusters and the strategic decision-making of the HCT, is a key coordination mechanism, yet NGO involvement is usually limited to the cluster co-leads. The actual shape and function of the ICCG is decided by the HCT in collaboration with OCHA, and NGOs are encouraged to ensure they participate fully to this process and secure at least one seat for the NGO forum.

c) *"Support efforts led by the HC to obtain free, timely, safe and unimpeded access by humanitarian organisations to populations in need."*

ICVA comments:

Efforts to secure access and overcome Bureaucratic and Administrative Impediments (BAIs)[4] are led by the HC but remain a collective responsibility.

This remains true for negotiation efforts with host governments: While the HC, through their position and their ambassadorial status, has increased access to the higher levels of government, such negotiations should remain a collective and coordinated effort with each HCT member

participating through their own networks of relationships.

This responsibility also implies engaging – or supervising the engagement - with non-state actors for the purpose of securing access, and HCT members should be ready to support this engagement within the framework of the humanitarian principles and IHL.

While the HC has a specific responsibility for alleviating BAI, individual mandates should also be

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[4] IASC guidance for understanding and addressing BAIs can be found here: https://interagencystandingcommittee.org/sites/default/files/migrated/2022-01/IASC%20Guidance%20Understanding%20and%20Addressing%20Bureaucratic%20and%20Administrative%20Impediments%20to%20Humanitarian%20Action_Framework%20for%20a%20System-wide%20Approach.pdf.

recognised, including the dual role of HC and RC. The RC/HC might not be able to carry advocacy message strongly critical of the government, especially publicly, as they must balance their two roles. It is important to understand this limitation when attempting to leverage the direct access to the higher levels of government the HC has and craft advocacy messages accordingly.

d) *"Ensure that preparedness and response efforts are inclusive and coordinated."*

ICVA comments:

Early warning and preparedness are one of the key functions of HCTs. It is the responsibility of the HCT to ensure local and national actors are included in these efforts, which might include conducting training exercises and capacity building to ensure those actors are ready to respond to upcoming crises.

e) *"Ensure that the international humanitarian response is coordinated with national, sub- national and local level authorities."*

ICVA comments:

While the level of coordination and collaboration between each individual organisation and the host government will vary, the IASC recognises that "the Affected States retains the primary role in the initiation, organisation, coordination, and implementation of humanitarian assistance within its territory."

As such, it remains the responsibility of the HCT as a whole to ensure all coordination structures, including the HCT itself, operate in coordination and in support of the national and local authorities wherever possible.

f) *"Support and contribute to efforts to address the humanitarian-development nexus."*

ICVA comments:

Since the World Humanitarian Summit in 2016, international humanitarian organisations have committed to supporting stronger links between humanitarian and development action. The HCT has a formal role in supporting those efforts, however, the HCT should remain a forum dedicated to humanitarian action.

Its role is to *support* efforts linking humanitarian-development action, not necessarily implement them. For example, this could involve developing a strategy to promote such links, or setting up a separate structure where humanitarian and development actors can dialogue.

HCT Compact and Accountability

"Individual HCT Members and their respective organisations, make a commitment to contribute to the HCT as a collective, and to pursue collective outcomes."

ICVA comments:

Each HCT member is expected to put their experience and expertise in service to the collective response. By nature, topics brought up in an HCT might concern sectors or geographical areas that are of less interest to some individual organisations; nevertheless, all members should endeavour to contribute on behalf of a larger constituency, find solutions and bring about a more efficient response.

Similarly, the HCT's work must be able to respond to the specific concerns and issues that could affect organisations with quite different mandates and operational modalities. As such, NGOs should have some understanding of the specific limitations and challenges faced by their UN colleagues; when in doubt, it is reasonable to ask for clarification to better understand how the system may constrain UN agencies. In reverse, NGO-specific issues should be clearly laid out, without assuming UN colleagues fully understand the inner workings of NGOs.

In the end, the goal of the HCT should remain the pursuit of collective outcomes: a collective decision is only meaningful if followed by collective action. As mentioned above, it can be difficult for NGO representatives to commit the whole NGO collective without prior discussions. The best practice is to have those inter-NGO discussions before the HCT proper, once the agenda has been finalised. Where that is not feasible, NGOs should make clear in HCT that they will have to go back to the collective before fully committing to a decision.

"This contribution should be considered a key component of the responsibilities and performance of country-level operational leadership of each member agency."

ICVA comments:

Country Directors, when acting as members of the HCT, if not at all times, are expected to use this membership to contribute to the collective, not to advance their individual organisations' mandates and interests.

Technically, the ToRs would call for these contributions to then be reflected in a country director's performance review, but most organisations would be unable to assess this appropriately.

> *"Members of the HCT outline specific mutual responsibilities, in an annual HCT Compact, that is developed in country and provides the basis for periodic review of the performance of the HCT."*

ICVA comments:

The HCT Compact is a document that clearly outlines the important actions the HCT will undertake to fulfill the roles and responsibilities outlined above (plus 4 additional mandatory areas of responsibilities outlined below). The document should be produced at least once a year, although a shorter period can be agreed upon where necessary. At the end of the implementation period, it should be reviewed and performance self-assessed by HCT members.

The HCT Compact is the main tool to ensure HCT accountability and is mandated by the IASC. However, many HCTs either do not implement it, or implement it partially (the performance review, usually achieved during the annual HCT retreat, can often be notably lacking).

Where it is not implemented, NGOs are strongly encouraged to engage with the HC to resolve the situation, with a reminder that the HCT compact and its accompanying performance review process are mandated by the IASC.

- *"A collective approach for ensuring that protection is central to humanitarian action, including developing and implementing a common HCT strategy on protection."*

- *"A collective approach to Accountability to Affected People (AAP) for engaging with, ensuring feedback to and adjusting the response based on the views of affected people."*

- *"A collective mechanism and approach to Protection from Sexual Exploitation and Abuse (PSEA) by humanitarian workers, including a Code of Conduct, aligned with any other mechanisms in place to deal with this issue."*

- *"A collective approach to addressing Sexual and Gender based Violence."*

ICVA comments:

While the Terms of Reference defines 6 roles and responsibilities for the HCT, it confusingly further defines an additional "four mandatory responsibilities" in the Accountability section. This is sometimes referred to the "6+4" responsibilities of HCTs.

While the initial 6 responsibilities define broad areas the HCT must cover, the latter 4 are more specific, defining both necessary goals and the accompanying structures that must be put in place in each country to ensure accountability in the response.

These include an HCT strategy for ensuring the centrality of protection, an HCT collective approach for AAP, and an HCT collective approach for GBV. These documents should include concrete action points and will need regular

revision to remain relevant to the context. In addition, the HCT must ensure their country has a PSEA network, a collective code of conduct (this is separate from individual organisations' internal code) and a collective reporting system.

The actual implementation of these strategies can be delegated to dedicated working groups, often composed of a mix of HCT members and specialists from each field, but the HCT and the HC remain ultimately accountable for their implementation.

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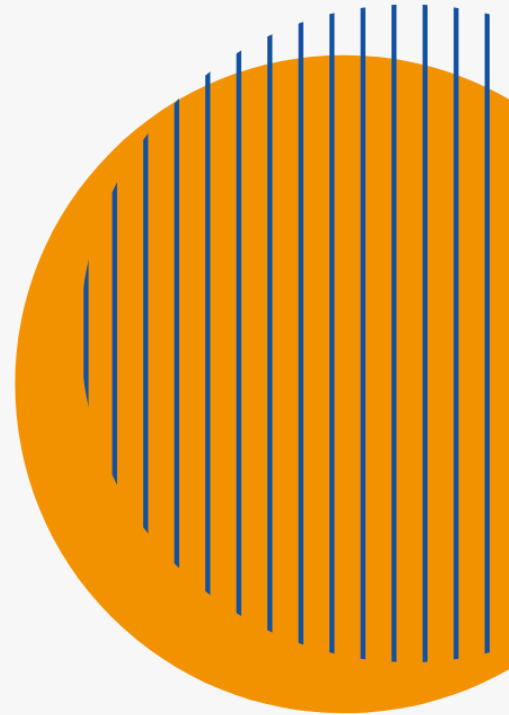
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