OPPORTUNITIES FOR INTEGRATION ACROSS CLUSTERS

This table outlines opportunities for integrated programming that clusters could consider when developing operational plans – this is a summary of ideas that were discussed during group work sessions in day one and two of the workshop. The table does not include coordination or joint assessment – focus is on opportunities for integration at operational / implementation level.

### Education cluster - opportunities for integrated programming with other clusters

<table>
<thead>
<tr>
<th>Cluster</th>
<th>Opportunities for integrated programming with other clusters</th>
</tr>
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<tbody>
<tr>
<td>FSL</td>
<td>Platform for agriculture and agroforestry clubs; and demonstration gardens to focus on production and preparation of local nutritious foods. School feeding programmes.</td>
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<tr>
<td>Health</td>
<td>Platform for health campaigns on relevant issues – eg deworming and immunisation. Sharing harmonised health behaviour change messages. Referral of sick children. Provide ECD support for infants at health facilities, both in patient and out patient.</td>
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<tr>
<td>Nutrition</td>
<td>Sharing nutrition education messages to pupils at all levels. Pre-school - MUAC screening and referral to nutrition services. Provide ECD support for infants at nutrition facilities – including those attending SC, OTP and in MIYCF sessions. School feeding programmes.</td>
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<tr>
<td>WASH</td>
<td>Work with wash cluster to develop and provide minimum WASH package at schools (Latrine, h/washing facilities &amp; soap, safe water source - water treatment and storage and harmonised behaviour change messages). Platform for Training on Child Hygiene and sanitation transformation (CHAST) and of menstrual hygiene management (MHM). Provision of hygiene kits for adolescent girls. Hygiene promotion in school clubs.</td>
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### FSL cluster - opportunities for integrated programme with other clusters

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<tr>
<td>Education</td>
<td>Agriculture and Agroforestry clubs at schools. Demonstration gardens at schools to focus on production and preparation of local nutritious foods. School feeding programmes.</td>
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<tr>
<td>Health</td>
<td>Conditional cash transfers for health services.</td>
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<tr>
<td>Nutrition</td>
<td>Conditional cash transfers for nutrition services. Cash transfer to produce certain foods. Vouchers for purchase of specific food groups. Promote income generation activities with focus on production of highly nutritious foods. Support diversification of household income sources through income generation activities, such as poultry keeping, fish farming, pig farming and marketing, honey and ground-nut production and marketing and marketing of gum Arabic, and non-agriculture skills for money – eg casual farm labour. Demonstration gardens at nutrition facilities to focus on production and preparation of local nutritious foods. Support vegetable gardens and processing. Diversification of food sources. Training of community on growing new foods – peer to peer (farmers). Fisheries support and nutrition education. Mitigation of post-harvest loss of food. Engage in SUN activity promoting public/private partnership for food production and marketing.</td>
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<tr>
<td>WASH</td>
<td>Use of food for work to build dykes, flood plains.</td>
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<tr>
<td>Protection</td>
<td>Orientation and awareness raising of FS staff, including extension workers / volunteers and establishment of referral mechanisms from FS to protection cluster for CP, GBV and other protection issues Observations for vulnerable persons (for referral) at GFD/TFD Establish criteria and referral mechanisms for protection cluster to refer affected populations to FS services and provide orientation to protection cluster staff</td>
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<tr>
<td>Education</td>
<td>Use Schools for de-worming and immunisation campaigns and sharing harmonised behaviour change messages</td>
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<tr>
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| Nutrition | Incorporate MUAC screening of children under 5yrs and referral of malnourished children to nutrition services into  
- all childhood vaccination activity – this includes house to house immunisation, national immunisation days and routine immunisation at health facilities  
- integrated community case management (community level) and sick child consultation (facility level)  
Incorporate MUAC screening and referral of all PLW in Antenatal and MCH consultations  
Incorporate MIYCF into ANC and MCH services  
Integrate TSFP/OTP/SC activities in health facilities PHCC/PHCU and mobile clinics  
Incorporate micronutrient supplementation of PLW and children as per protocols  
Build capacity of facility-based health workers on nutrition  
Build capacity of Community Health Volunteers to nutrition (to respond to nutrition issues)  
Incorporate nutrition into  
- follow up visits at household level  
- HMIS  
- health facility supervisory process  
- monthly health facility meetings  
Establish referral criteria and mechanism/process between health and nutrition services |
| WASH | Harmonised health behaviour change messages  
Community campaigns on WASH – eg open defecation |
| Protection | Orientation and awareness raising of health staff, including facility and community staff and volunteers and establishment of referral mechanisms from health to protection cluster for CP, GBV and other protection issues  
Observations for vulnerable persons (for referral) at health facilities and at community / household level  
Establish criteria and referral mechanisms for protection cluster to refer affected populations for health services and provide orientation to protection cluster staff |
| Nutrition cluster - opportunities for integrated programme with other clusters |  
Education | Pre-school – support MUAC screening and referral to nutrition services – establish referral criteria and mechanism/process and provide training and orientation of pre-school teachers  
Primary and secondary schools – (for behaviour change and nutrition education in relation to infants, children and adolescents, training of teachers and school gardening) |
| FSL | Nutrition facilities a platform for demonstration gardens to focus on production of local nutritious foods  
Support MUAC screening and referral at GFD & TFD establish referral criteria and mechanism/process |
| Health | Harmonised behaviour change messaging at Health facility, community and household level  
Support nutrition education, MIYCF, micronutrient supplementation, and screening and referral for treatment of acute malnutrition through |
| **WASH** | Nutrition education / MIYCF messaging at water points  
Harmonised behaviour change messaging at nutrition facility, community and household level  
MUAC screening and referral by WASH cluster where appropriate - establish referral criteria and mechanism/process |
| **Protection** | Orientation and awareness raising of nutrition staff, including facility and community staff and volunteers and establishment of referral mechanisms from nutrition to protection cluster for CP, GBV and other protection issues  
Observations for vulnerable persons (for referral) at nutrition facilities and at community / household level  
MUAC screening and referral by protection cluster where appropriate - establish referral criteria and mechanism/process  
Establish criteria and referral mechanisms for protection cluster to refer affected populations for other nutrition services (eg MIYCF) and provide orientation to protection cluster staff |
| **WASH cluster - opportunities for integrated programme with other clusters** |  
**Education**  
Provide minimum WASH package at schools (Latrine, h/washing facilities & soap, safe / clean water source - water treatment and storage and harmonised behaviour change messages)  
Provide hygiene kits for adolescent girls |
|  |  
**FSL**  
Provide minimum WASH package at key markets and key food distribution points (Latrines, h/washing facilities & soap, safe / clean water source - water treatment and storage and harmonised behaviour change messages)  
Provide safe water for animals at water points-dams and hafiers  
Provision of sun shelters at distribution points  
Provision of water for kitchen gardens including recycling water  
Provision of water points, latrines and sun shelters at markets and food distribution points |
|  |  
**Health**  
Provide minimum WASH package at health facilities PHCC/PHCU/Mobile and CFS (Latrine, h/washing facilities & soap, safe / clean water source – water treatment and storage and harmonised behaviour change messages)  
Vector control – fumigation and rodent control, mosquito nets for pregnant mothers |
|  |  
**Nutrition**  
Provide Minimum WASH package at nutrition facilities (Latrine, h/washing facilities & soap, safe/clean water source – water treatment and storage and harmonised behaviour change messages) |
|  |  
**Protection**  
Orientation and awareness raising of WASH staff, including extension workers / volunteers and establishment of referral mechanisms from WASH to protection cluster for CP, GBV and other protection issues  
Observations for vulnerable persons (for referral) at water facilities |
| **Protection cluster - opportunities for integrated programme with other clusters** |  
**All clusters**  
Share information about operational presence at state and county levels to start building synergies  
Establish specific criteria and mechanisms for EACH cluster to refer affected population requiring protection services (GBV, CP and general protection)  
Provide orientation and training to relevant staff from each cluster at national, state and county level |