
Second Regular Session of the Executive Board
September 2017
Summary

- The evaluation identifies areas of improvement and issues recommendations at global, regional and national level in Policy and Programmes, Coordination, Operations and Capacity building.

- The findings are being used to strengthen key management functions to better prepare for and respond to health emergencies.

- Strategies and results related to public health emergencies are being integrated into the UNICEF Strategic Plan, 2018–2021.

- Actions are under way to strengthen capacities for rapid, large-scale deployment of financial, human and material resources in all emergencies.

- UNICEF will also strengthen the capacity of staff at headquarters, regional and country levels as well as government partners on community engagement and social mobilization to better prepare for and respond to health emergencies in high-risk countries.
Recommendation 1:

The UNICEF West and Central Africa Regional Office (WCARO), Country Offices (COs) and partners in the three most-affected countries (Guinea, Liberia and Sierra Leone) should ensure at minimum that:

(a) **HEALTH SYSTEMS** retain a rapid response capacity to prevent Ebola outbreaks and develop International Health Regulations (IHR) core capacities;

(b) **COMMUNITY health systems** are reinforced in the most-affected communities; and

(c) **children most affected by Ebola** receive adequate PROTECTION.

Actions taken to date:

1. All three UNICEF COs are strengthening community health systems in the most-affected communities modelling innovative approaches for early warning and monitoring of epidemics at the community level using RapidPro.

2. All three countries are: (a) following up on Ebola-affected children through case management; (b) mapping child survivors or children affected by Ebola who did not receive at least two post-reunification family visits; and (c) conducting follow-up visits during post-reunification. (NGOs).

3. All three countries have mapped the existing community-based child protection systems (CBCPS) that were established during the Ebola crisis, and have activated early warning systems.
**Recommendation 2:**

The UNICEF Global Management Team (GMT) should **DEVELOP A POLICY AND ACCOUNTABILITY FRAMEWORK** for responding to public health emergencies that includes:

a) specific goals;
b) programme guidance;
c) global partnership objectives; and
d) assessment of broader humanitarian risks.

Whether produced as an addendum to the Core Commitments for Children (CCCs) in Humanitarian Action or a separate policy, it should complement and build on rather than duplicate existing UNICEF emergency response policies and processes.

**Actions taken to date:**

- Under HEPI, UNICEF has defined principles and areas of work for preparedness and response to health emergencies: (a) internal organization and prioritization, (b) disease-specific preparation, (c) institutional strengthening, and (d) cooperation with partners.

- As part of HEPI, first drafts of ‘packages of support’ for Category 1 diseases have been developed. The ‘packages of support’ for each Category 1 disease include disease-specific quick notes, programme sector guide, supply requirements, repository of guidance, tools, training materials and C4D guidance and tools.
Recommendation 3:
The UNICEF GMT should recognize areas for improvement and strengthen COORDINATION, STRATEGY and INFORMATION capacities for public health emergencies. Drawing on lessons learned from the Ebola response, UNICEF should develop tools, guidance and mechanisms and strengthen capacities for: 

a) global emergency coordination; 
b) planning, programme support and performance monitoring; and 
c) information and knowledge management functions.

Actions taken to date:

• Recruitment of Principal Adviser for Public Health Emergencies (D-1) is under way.

• UNICEF is on the Steering Committee for The Global Outbreak Alert and Response Network (GOARN), which is the main global coordination mechanism.

• SD is finalizing remaining long-term agreements (LTAs) with suppliers for supplies identified in Category 1 disease-supply lists and has put in place physical stock at the SD warehouse or suppliers’ premises for these items. All LTAs will be in place for Category 1 supplies by the end of Q1 2017.

• UNICEF Procedure on Preparedness for Emergency Response was issued in December 2016 and is testing the new EPP system in Liberia and Sierra Leone to ensure that the experiences of preparing for and responding to health emergencies from Ebola is fully captured in the tool.

• Updates on morbidity and mortality related to Zika and other priority epidemic diseases have been consolidated and disseminated to UNICEF headquarters, ROs and COs.

• UNICEF Sharepoint site on public health emergencies, which contains key updates, guidance and tools, has been established.
Recommendation 4: The UNICEF GMT should continue to **STRENGTHEN CAPACITIES** for rapid, large-scale deployment of financial, human and material resources in emergencies by: (a) applying lessons and protocols from the Ebola response on duty of care; (b) significantly increasing emergency human-resource capacities and emergency competencies in country offices; and (c) involving operational and administrative staff in strategy and programme management.

Actions taken to date:
- UNICEF participates in the High Level Committee for Management Interagency Task Force on reconciling “duty of care” for United Nations personnel while operating in high-risk environments, which is under the United Nations High-level Committee on Management.
- Development of a [staff safety guide](#) that include specifics for Ebola outbreaks. The guide is being updated in collaboration with CDC and WHO to include disease specific recommendations and material requirements.

Recommendation 5: UNICEF EMOPS and the UNICEF Programme Division should further develop **COMMUNITY BASED APPROACH** as an implementation modality inclusive of strong AAP [Accountability to Affected Populations] and community engagement components. Recognizing the central role of communities in stopping Ebola, UNICEF should focus on strengthening local capacities and systems for health and social protection at the community level.

Actions:
- The global inter-agency Communication and Community Engagement (CCE) Initiative for emergency response was established in Q4 2016. The [Interagency](#) Steering Group is set up with concept note and workplan approved.
- New York University Outbreak Communication course: A total of 50 UNICEF CO and RO staff (C4D and monitoring and evaluation) have been trained and are now deployable in emergencies.
- Staff from Ministries of Health in 16 countries in ESAR were trained on C4D and community engagement in the context of outbreaks by C4D/Polio teams in June 2016. Training will be expanded to WCAR in 2017.
THANK YOU!