

# Draft

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## **Managing WHO Humanitarian Response in the Field**

## Acknowledgements

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# Contents

About this handbook.....	5
Acronyms and abbreviations .....	6
Aide-mémoire for a WR (or head of country office) leading WHO humanitarian response	
• Principal responsibilities of a WR /head of country office .....	7
• Format for allocating emergency-related responsibilities within the WCO.....	9

## **PART I – Framework for WHO Response**

<b>1. Objectives, key functions and principles .....</b>	<b>11</b>
1.1 WHO objectives, role and core functions in humanitarian response .....	12
1.2 Overall guiding principles for WHO humanitarian response .....	15
1.3 Role in relation to the Health Cluster.....	17
<b>2. The response planning and management processes .....</b>	<b>19</b>
2.1 The emergency response process .....	20
2.2 Steps in emergency programme planning and implementation.....	22
2.3 Key internal planning & management functions .....	24

## **PART II – Planning and managing the WHO response**

<b>3. Determining whether – and what kind of – WHO response is needed .....</b>	<b>25</b>
3.1 Preliminary contacts and actions.....	26
3.2 Preliminary assessment/enquiries.....	29
3.3 Establishing an initial working scenario .....	32
3.4 Making a judgement on the need for and nature of WHO action.....	34
<b>4. Leading and enabling the WHO response .....</b>	<b>36</b>
4.1 Organizing the office; building a team .....	37
4.2 Equipping the WCO for information management.....	40
4.3 Accessing and mobilizing resources .....	43
<b>5. Assuring health information, assessment, situation analysis and monitoring .....</b>	<b>46</b>
5.1 Ensuring good health information management.....	47
5.2 Organizing – and ensuring the quality of – assessments .....	49
5.3 Assuring surveillance of the situation .....	53
5.4 Analysing the situation .....	56
<b>6 Defining objectives and preparing an action plan .....</b>	<b>59</b>
6.1 Defining objectives .....	61
6.2 Selecting response strategies .....	63
6.3 Protecting and rebuilding national systems and capacity .....	67
6.4 Defining priority projects and preparing a WHO action plan (filling gaps).....	68
<b>7. Planning and implementing projects; preparing appeals .....</b>	<b>72</b>
7.1 Preparing project proposals .....	73
7.2 Identifying and working with partners .....	76
7.3 Preparing CERF applications .....	78

7.4	Providing inputs to UN appeals .....	79
7-5	Managing (and monitoring) project implementation .....	82
<b>8.</b>	<b>Assuring effective communications.....</b>	<b>85</b>
8.1	Managing internal communications .....	86
8.2	Internal reporting .....	88
8.3	Managing external communications .....	90
8.4	Producing a health (cluster/sector) bulletin .....	92
<b>9.</b>	<b>Promoting coordinated health action and best practices .....</b>	<b>93</b>
9.1	Facilitating coordination.....	94
9.2	Providing guidance and support to health sector actors.....	97
<b>10.</b>	<b>Planning and managing WHO programme support activities .....</b>	<b>99</b>
10.1	Assuring security .....	100
10.3	Managing human resources.....	102
10.3	Mobilizing/recruiting national staff for field operations .....	104
10.4	Assuring admin. services .....	106
10.5	Assuring finance services.....	108
10.6	Procuring supplies.....	110
10.7	Assuring in-country transport & storage of supplies .....	113
10.8	Assuring ICT services (data systems & telecoms) .....	116
<b>11.</b>	<b>Phasing out .....</b>	<b>118</b>
11.1	Planning to phase-out .....	119
11.2	Organizing an evaluation or “lessons” exercise.....	122

## **PART III – Annexes**

Annex 1	Lessons learnt from WHO’s humanitarian action 2005-2007 .....	125
Annex 2	Effects of and responses to different types of disasters .....	126
Annex 3	Criteria for WHO emergency response.....	129
Annex 4	Emergency delegation of authority .....	130
Annex 5	Possible agenda for a first internal WCO emergency management team meeting .....	131
Annex 6	Format for a working scenario .....	132
Annex 7	The cluster approach.....	134
Annex 8	List of supplementary annexes on the CD-ROM .....	136

## About this handbook

### Its purpose

This handbook provides guidance for WHO Representatives (WR), Country Office staff and consultants in assessing and managing the response to health needs during humanitarian crises. These are key elements of WHO action in relation to Strategic Objective 5: *to reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact.*

The Handbook replaces the 1999 *Handbook for Emergency Field Operations* (EHA/FIELD/99.1). It complements and cross-references the WHO-HAC *Standard Operating Procedures* (SOPs), existing *technical guidance* on specific health-related interventions in emergencies, and the guidance expected from the *Global Health Cluster*. It focuses on management, defining the role and responsibilities of a WR and country office and providing the overall planning and management framework within which decisions have to be taken.

It provides comprehensive guidance for what to do in case of a major disaster or humanitarian crisis. The majority of natural disasters do not require such an intense or prolonged level of engagement by the international community but, in all cases, the WR (or head of the WHO country office) has specific responsibilities in relation to staff safety, information and analysis, coordination, determining what assistance (if any) might be needed from WHO and ensuring the efficient delivery of that assistance. The principal responsibilities are summarized in the panel on the next page.

### Its structure

The handbook is structured in three parts. Part I (chapters 1 and 2) outlines the framework for WHO emergency response. *All* staff and consultants involved in an emergency operation *must* be familiar with the basics summarized in Part I.

Part II (chapters 3 to 11) provides guidance on planning and managing the WHO response. In Part II, the chapters provide specific management guidance on what to do, when and why.

The annexes (numbered 1, 2, etc.) in Part III provide additional information.

Supplementary annexes (numbered A1, A2, B1, etc.) providing more detail, cross-cutting material, and selected tools are included on the CD-ROM that accompanies the Handbook together with other documents that are cross-referenced, including the standard operating procedures (SOPs) for WHO humanitarian action.

## Acronyms and abbreviations

AO	Administrative Officer (WCO)
CAP	consolidated appeal process (sometimes also “consolidated appeal”)
CERF	Central Emergency Response Fund (managed by OCHA)
CFSA	Chief Field Security Adviser (UNDSS)
CHAP	common humanitarian action plan (component of a CAP)
DO	Designated Official (for UN security, at country level)
EHA	Emergency and Humanitarian Action (WHO)
EMT	Emergency Management Team
FSA	Field Security Adviser (UNDSS)
FSCO	Field Security Coordination Officer (assigned by UNDSS to the Designated Official)
FSO	Field Security Officer (assigned by WHO or any individual UN agency)
HAC	Humanitarian Action in Crises (WHO)
HC	(UN/IASC) Humanitarian Coordinator
HCC	Health Cluster Coordinator
HeLiD	Health Library for Disasters (CD-ROM produced by PAHO and WHO)
IASC	Inter-Agency Standing Committee (for humanitarian action)
ICP	inter-country programme (WHO)
ICT	Information and communications technology
IHR	International Health Regulations
MOSS	Minimum operating security standards
MoH	Ministry of Health
NAF	needs analysis framework (used in a preparing a CHAP)
NGO	non-governmental organization
OCHA	U.N. Office for the Coordination of Humanitarian Affairs
PMR	project management, monitoring and reporting
PSC	programme support costs
RC	UN resident coordinator
RD	Regional Director (WHO)
RO	regional office (WHO)
sitrep	situation report (usually sent by email)
STP	short-term professional (WHO contract)
TOR	terms of reference
UNCT	UN country team
UNDP	UN Development Programme
UNDSS	UN Department for Staff Security
UNICEF	United Nations Children’s Fund
WASH	water, sanitation and hygiene
WCO	WHO country office
WFP	World Food Programme
WHO	World Health Organization
WR	WHO representative

## Aide-mémoire for a WHO Representative (or head of country office) leading WHO humanitarian response

This aide-mémoire includes a brief synthesis of the principal responsibilities of the WR/head of country office in responding to an emergency and provides a format that can be used when assigning emergency-related responsibilities within the WCO.

The WR/head of country office and assigned staff must also be aware of the objectives, key functions and principles outlined in Chapter 1, and the response planning and management processes in Chapter 2, and refer to the relevant sections in Part II of this handbook, and to the other references provided there, for detailed guidance.

It may be particularly useful, at the onset of a crisis, to also refer to *Annex 2 Effects of and responses to different types of disasters*.

### Principal responsibilities of the WR/ head of country office

Principal responsibilities	Action in all cases	Additional action in case of a major disaster or humanitarian crisis
Ensuring staff safety and security <i>Section 10.1</i>	Checking the whereabouts and safety of all staff and consultants. Ensuring that security plans exist, are adequate and known to everyone.	Ensuring minimum operating security standards (MOSS) compliance if in UN security phase 1 or above. Requesting and budgeting for field security officer (FSO) support, if needed. Briefing <i>all</i> UN FSOs on health action priorities.
Determining the scale of the emergency and whether WHO assistance may be required <i>Chapter 3</i>	Contacting the MoH, UNRC, other UN agencies and NGOs to get information on the scale of the emergency and what others are doing. Making a judgement concerning the need for WHO assistance and the role to be played by WHO.	Consulting immediately with RO and HQ-HAC
Ensuring office functioning and effective operational capacity <i>Section 4.1</i> <i>Chapter 10</i>	Ensuring that admin. and other office support systems continue to function. Re-deploying staff temporarily to emergency-related tasks. Requesting operational support from the RO, if needed.	Reorganizing the office, establishing an Emergency Management Team and operations room, defining responsibilities and lines of reporting, etc. Requesting the emergency delegation of authority from the RD, and staff and consultant support from RO and HQ. Ensuring adequate arrangements for

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