



Baseline survey of all-hazard preparedness in health clusters operations

Online questionnaire for
national and sub-national Health Cluster Coordinators

Conducted from March 7 to April 4, 2024

Survey objectives

Assess the level of preparedness planning and operational readiness to multiple hazards, including high-impact epidemics and pandemics.

- Map preparedness priority areas
- Identify needs for improved preparedness planning
- Identify gaps and priorities for capacity building

Create a baseline of the state of preparedness planning and readiness on which to build targeted support interventions.

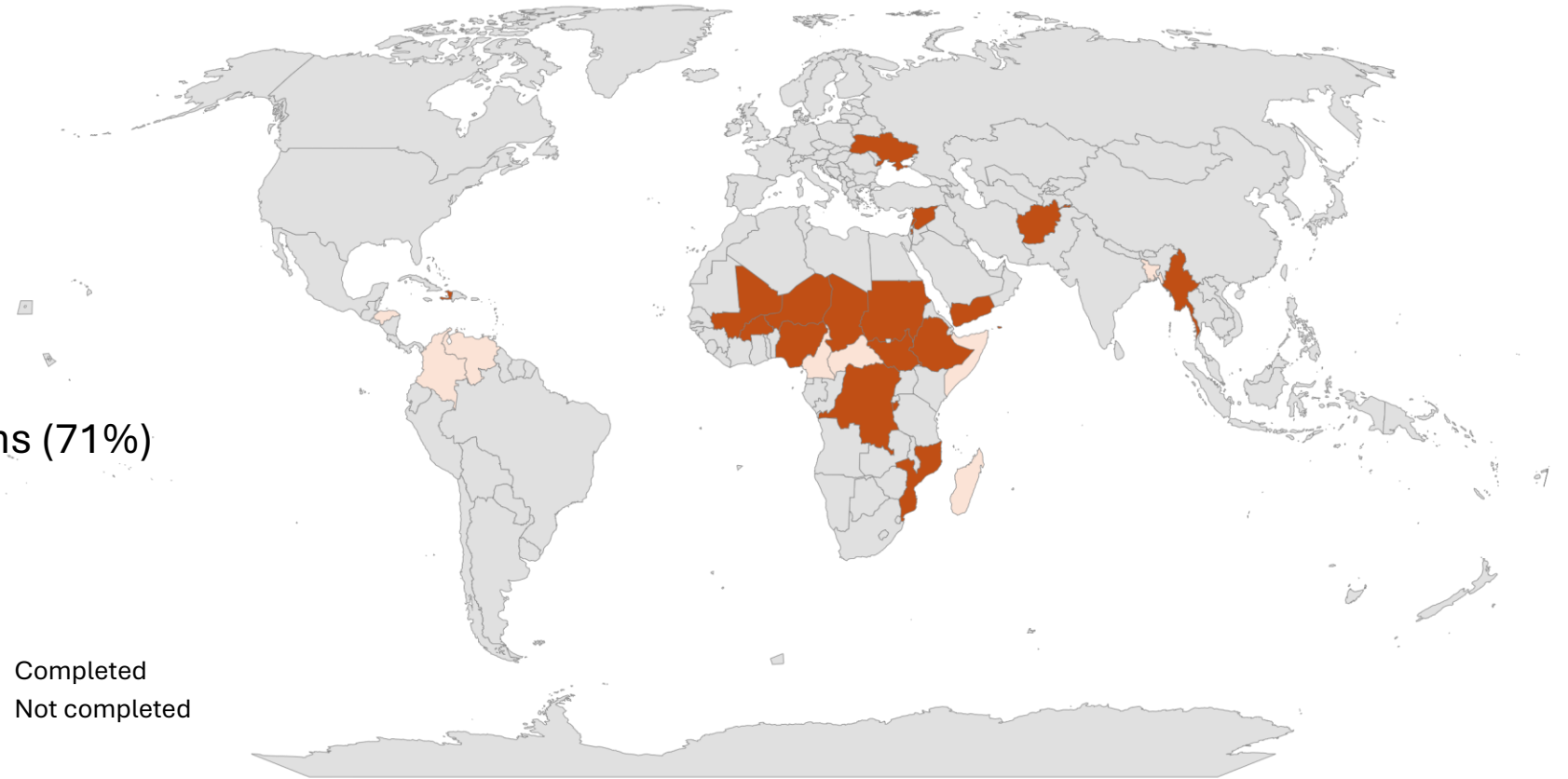
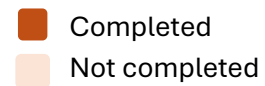
The survey was administered through an online questionnaire (Microsoft Forms). National Health Cluster Coordinators were requested to share the link with relevant national and subnational colleagues. Each respondent was asked to fill the questionnaire only once.

Survey response

Responses by cluster countries

Responses received

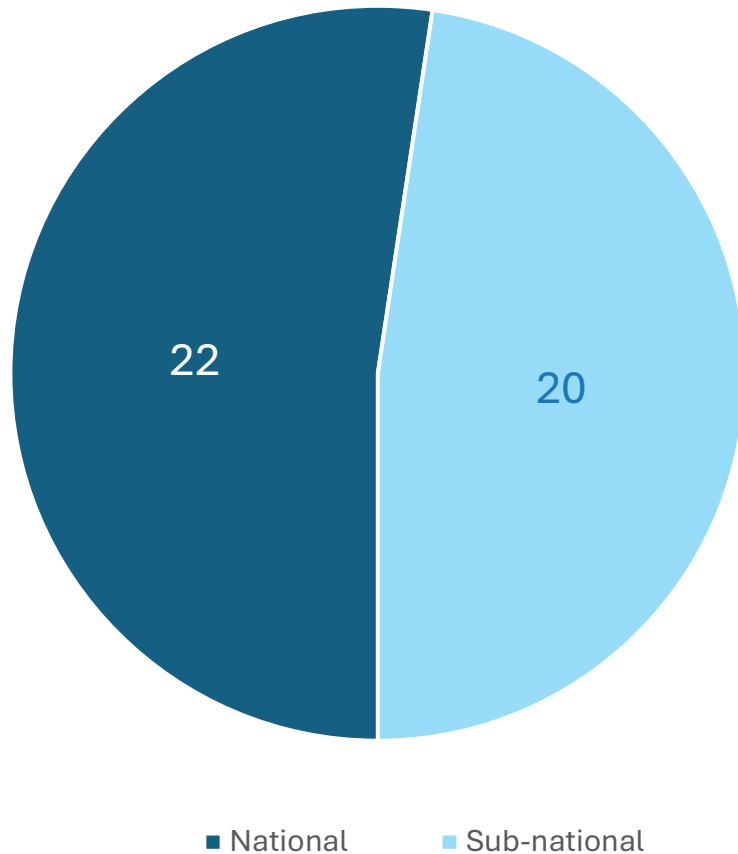
- 42 respondents
- 22 of 31 Cluster operations (71%)
- 1 Regional Cluster



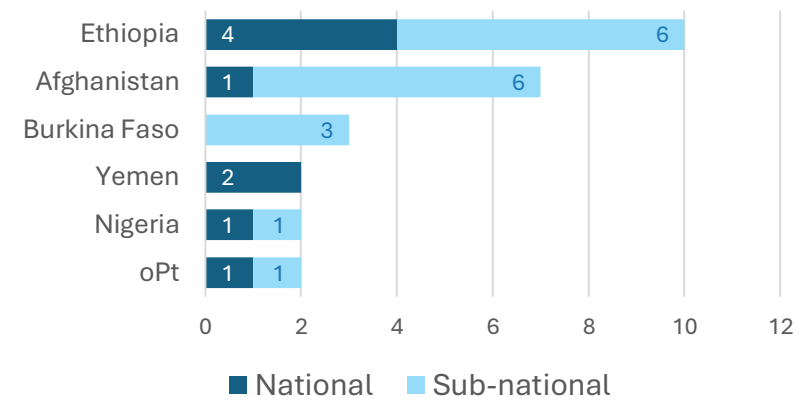
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Survey response cont.

National / sub-national respondents

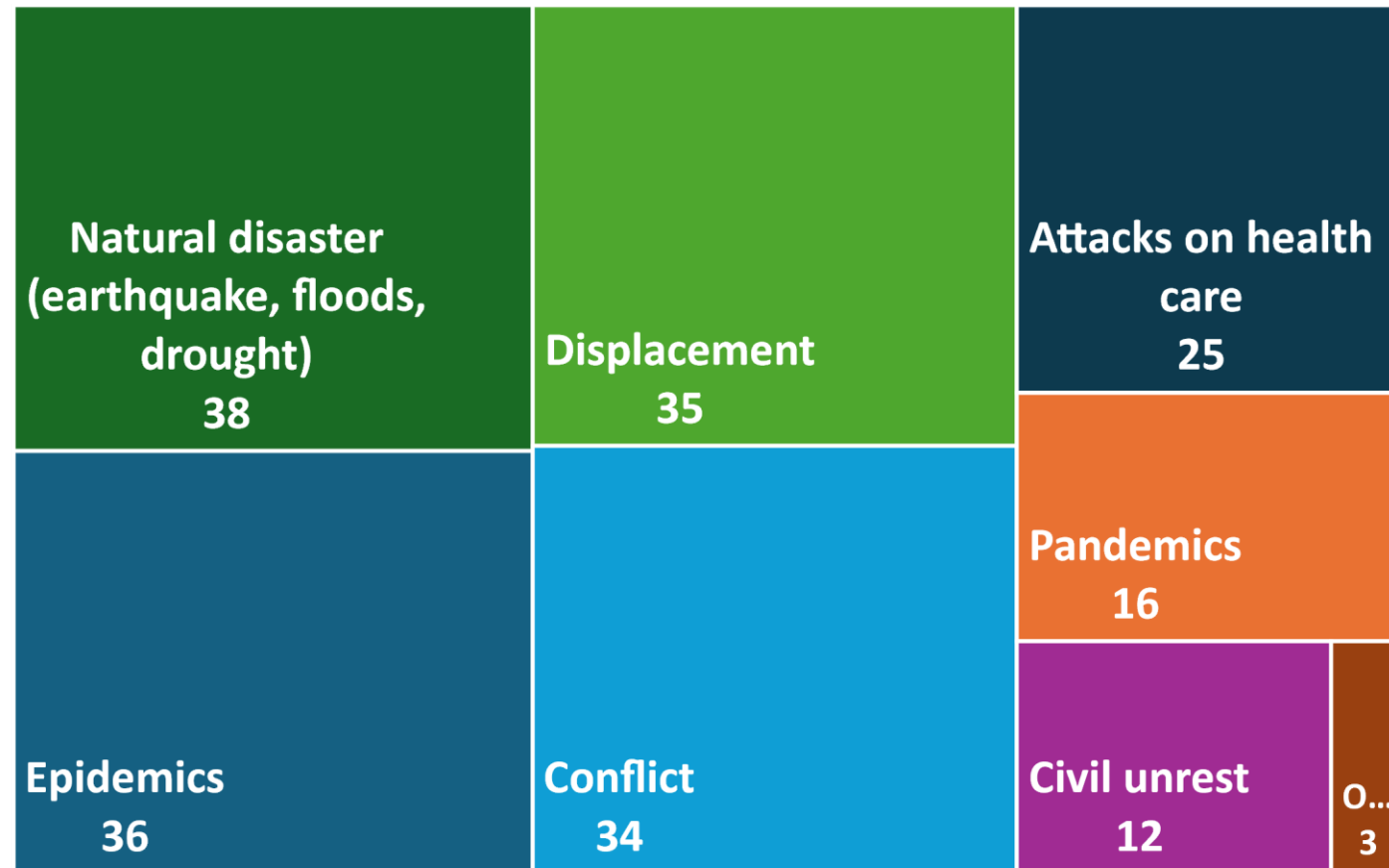


Cluster countries with multiple respondents



Scenarios

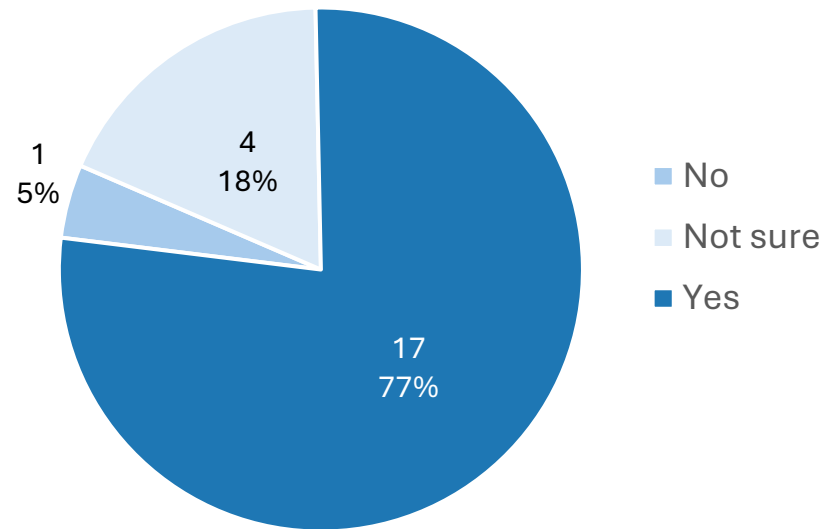
Which scenarios are you preparing for?



Cluster	Number of scenarios
Afghanistan	9
Burkina Faso	7
Democratic Republic of the Congo	7
Ethiopia	7
Syria	7
Haiti	6
occupied Palestinian territory	6
Chad	5
Mali	5
Myanmar	5
Niger	5
Nigeria	5
Sudan	5
Pacific	4
South Sudan	4
Yemen	4
Mozambique	3
Lebanon	2
Ukraine	2
Burundi	1

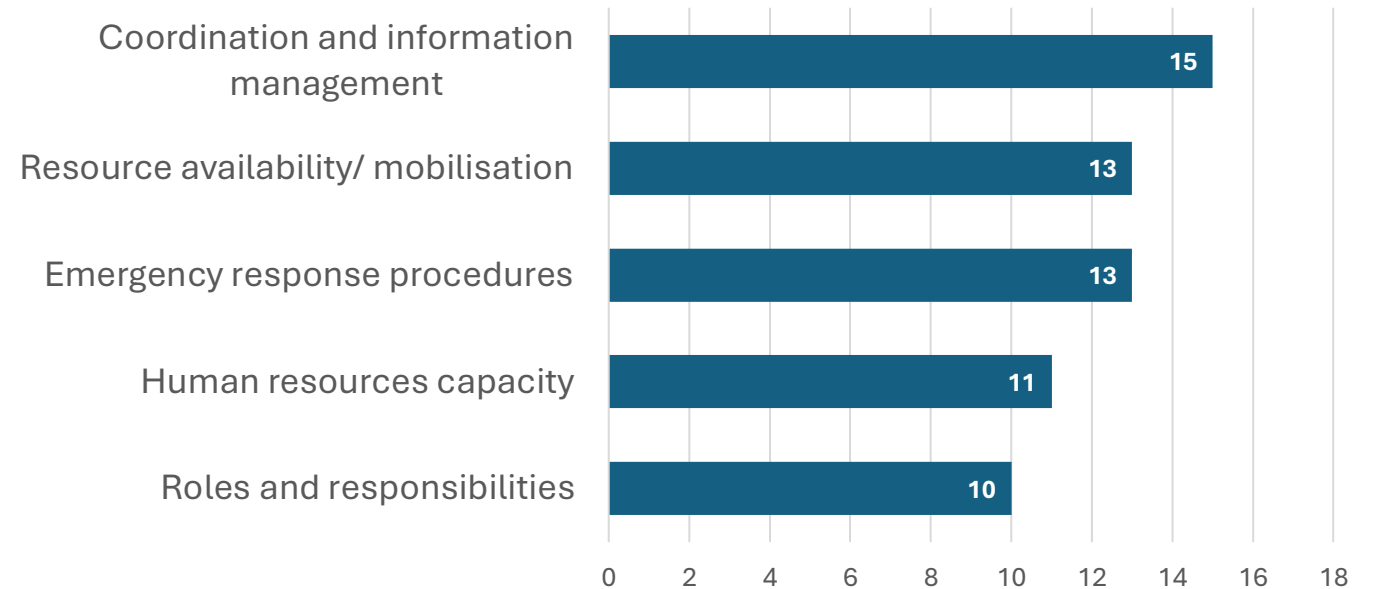
Contingency planning

Is or will the Health Cluster be developing contingency plans for specific scenarios?



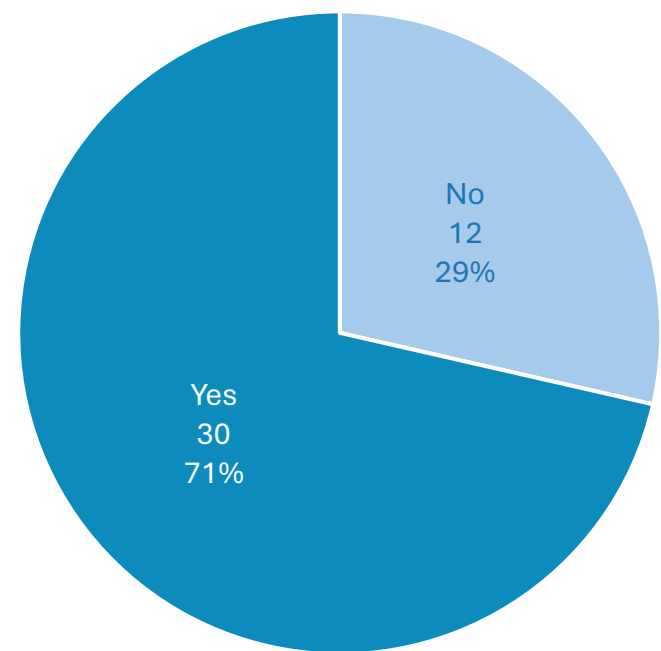
n = 22 cluster operations

Components included in contingency plans by cluster operation



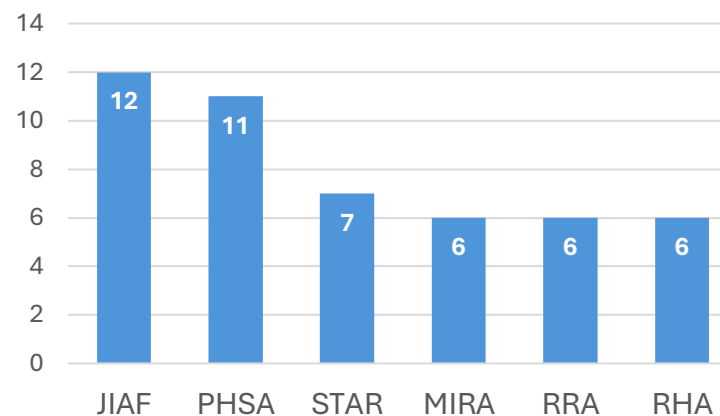
Assessments

Have you recently assessed risks, hazards, vulnerabilities, particularly since the end of the COVID-19 pandemic?

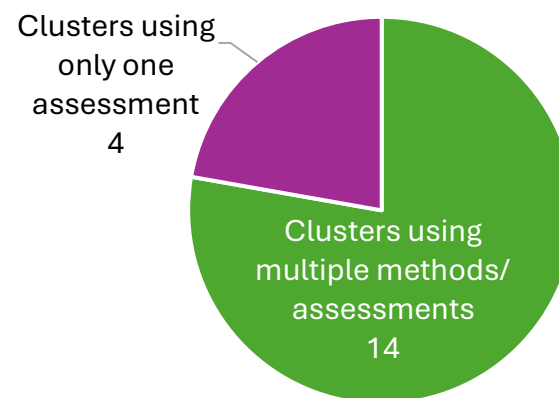
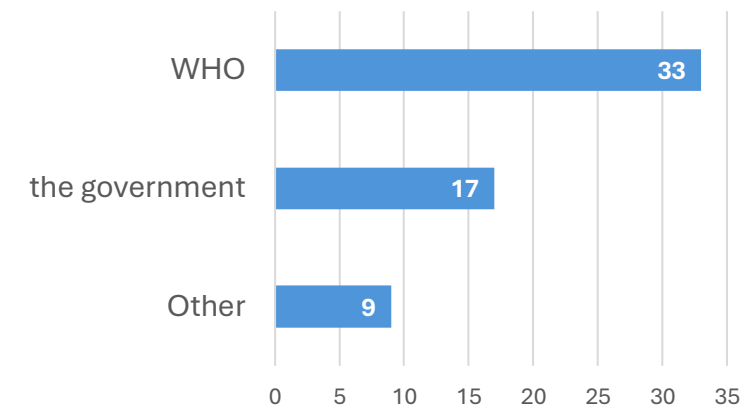


n = 42 responses

If yes, please specify assessment method



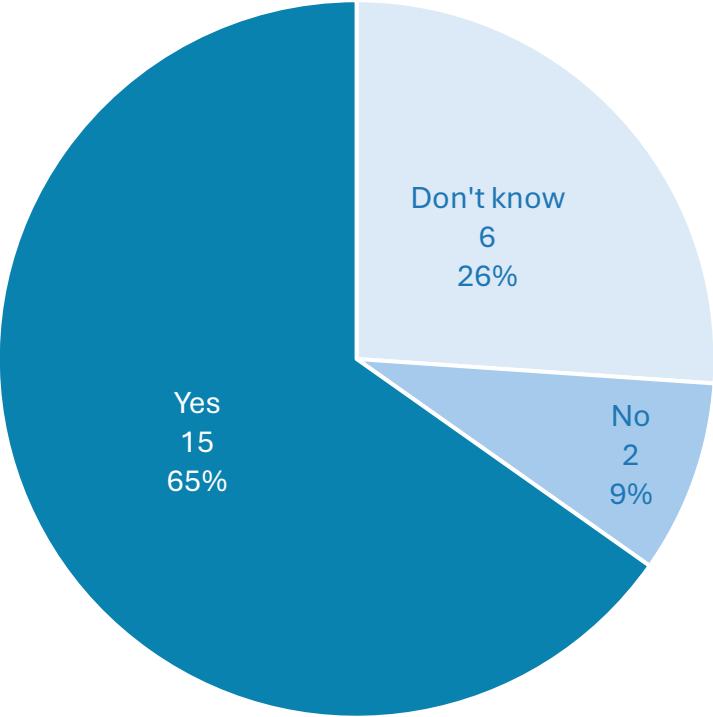
Are you aware of recent risk assessments from...



n = 18 responses

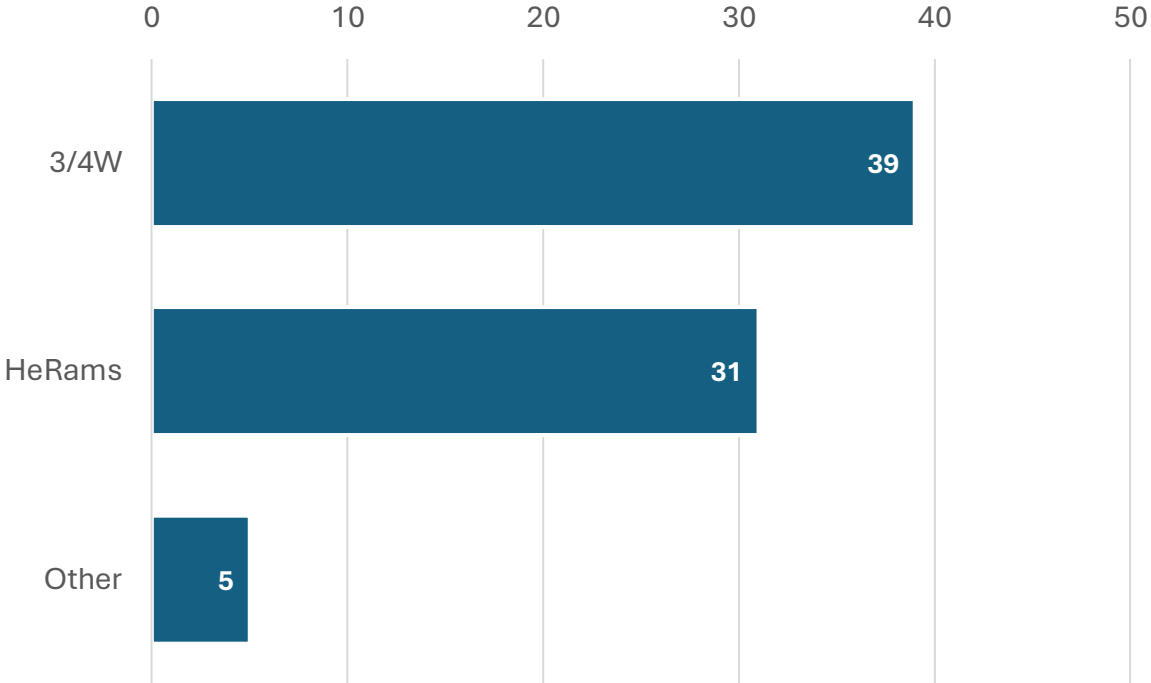
Assessments cont.

Are affected populations included in national risk registers?



n = 23 responses

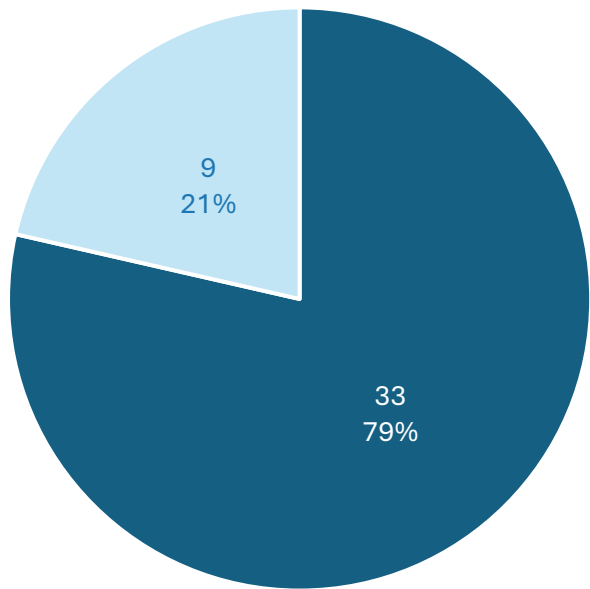
Is there a current landscaping of health system capacities, including health facility, service availability and provider/ partner mapping?



n = multiple responses from 42 respondents

Humanitarian Coordination

Is there a coordinated multisectoral preparedness planning approach, or are clusters/ sectors working in parallel?



■ Coordinated approach ■ Fragmented, parallel

n = 42 responses

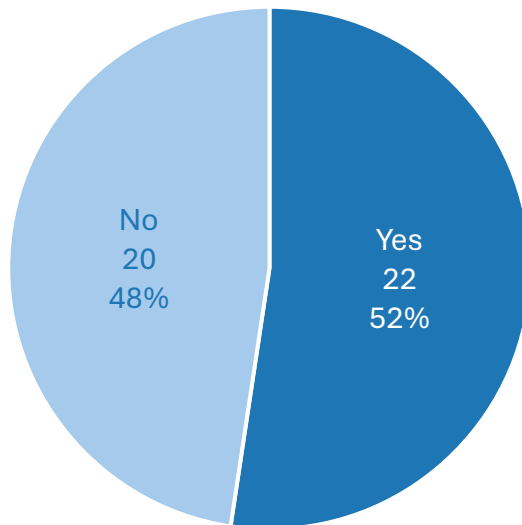
Are there defined work streams?

Workstreams by hazard	Workstreams by EPR components	Workstreams by coordination mechanism
Population displacement	Multisectoral assessment	Multisectoral preparedness guided by PHEOC
Disease outbreaks	Needs analysis	Needs assessment and contingency planning through ICCG
Floods	Disease Surveillance and Early Warning	Preparedness and response plan included in HRP
Food insecurity	Emergency Medical Care	
Conflict	Health Systems Strengthening	
Insecurity	Risk Communication and Community Engagement	
Winter (Ukraine)	Coordination and Partnerships	
Earthquake contingency plan (northwest Syria)	Access and accountability	

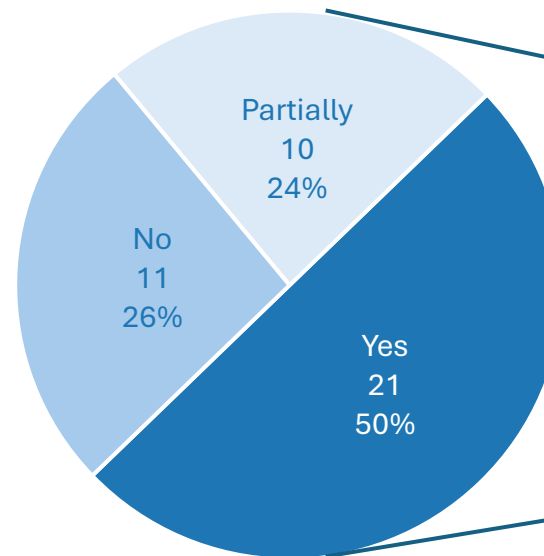
n = 24 responses

Health Cluster Coordination

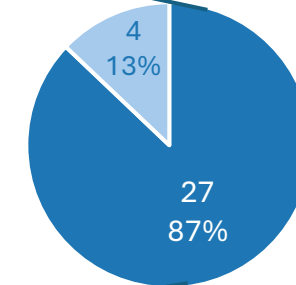
Do you have a preparedness specific WG, TF or other work stream within the health cluster coordination?



Were you able to plan for and cost specific preparedness actions into the HRP 2024?



Is there a specific focus on strengthening continuous delivery of essential health services?

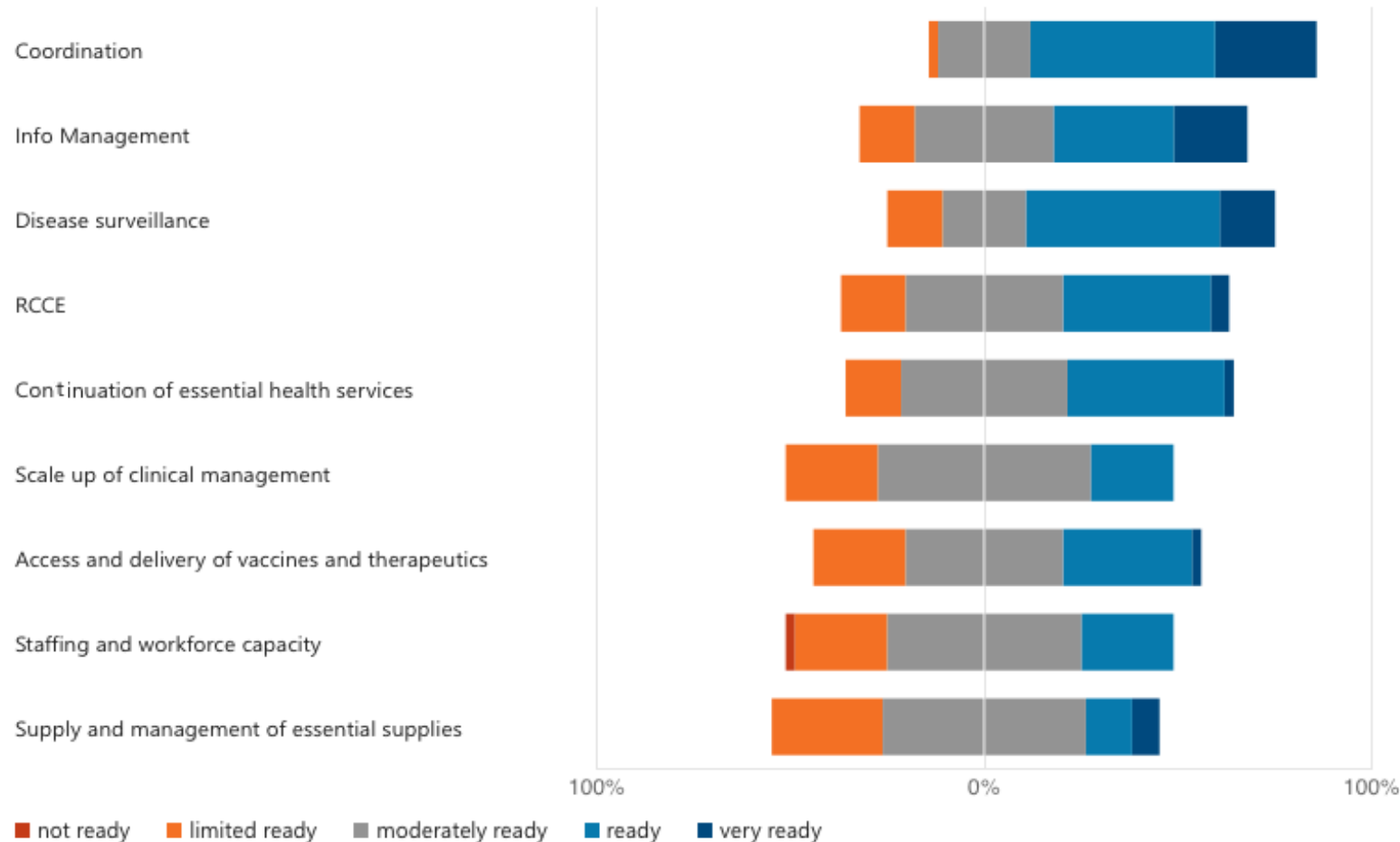


■ Yes ■ No

n = 42 responses

Health Cluster Coordination cont.

Please rate the capacity of your cluster partners, as a collective, to be ready, at this point in time, to respond to an emergency in these following response components.

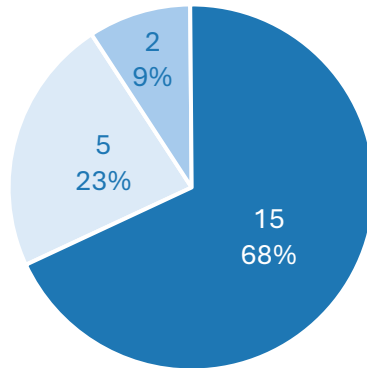


Explanatory note on rating scale:

- **Not ready** (a response would not be possible at this moment)
- **Limited ready** (even a limited response would require extensive resources and time)
- **Moderately ready** (a response is possible but with limitations and delays)
- **Ready** (a response can be mounted with available resources and within an appropriate time)
- **Very ready** (an effective response can be mounted, and additional resources acquired without delay)

Coordination with governments

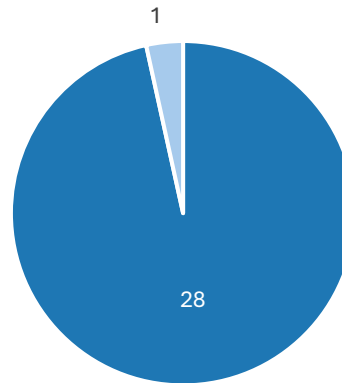
Does the government have or is in the process of developing preparedness plans?



■ Don't know ■ No ■ Yes

n = 22 cluster operations

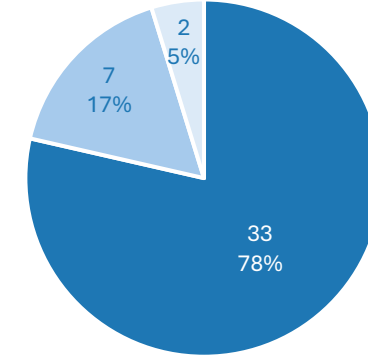
If yes, is the health cluster actively engaged?



■ Yes ■ No

n = 29 responses

Is there a dedicated coordination platform for national preparedness, including information management?

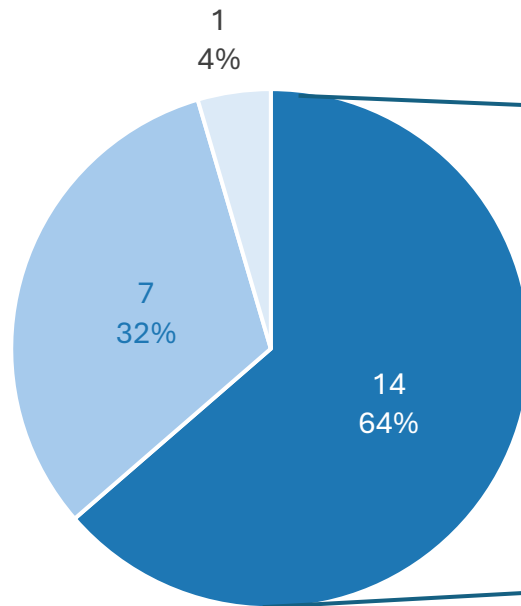


■ Yes ■ No ■ Don't know

n = 42 responses

Public Health Emergency Operations Centres

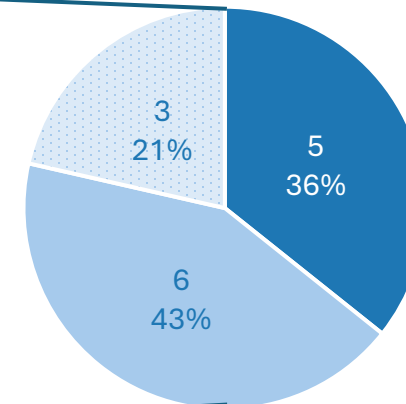
Does a functioning [public health] emergency operations centre exist?



■ Yes ■ No ■ Don't know

n = 22 cluster operations

Does the PHEOC extend to the sub-national level?

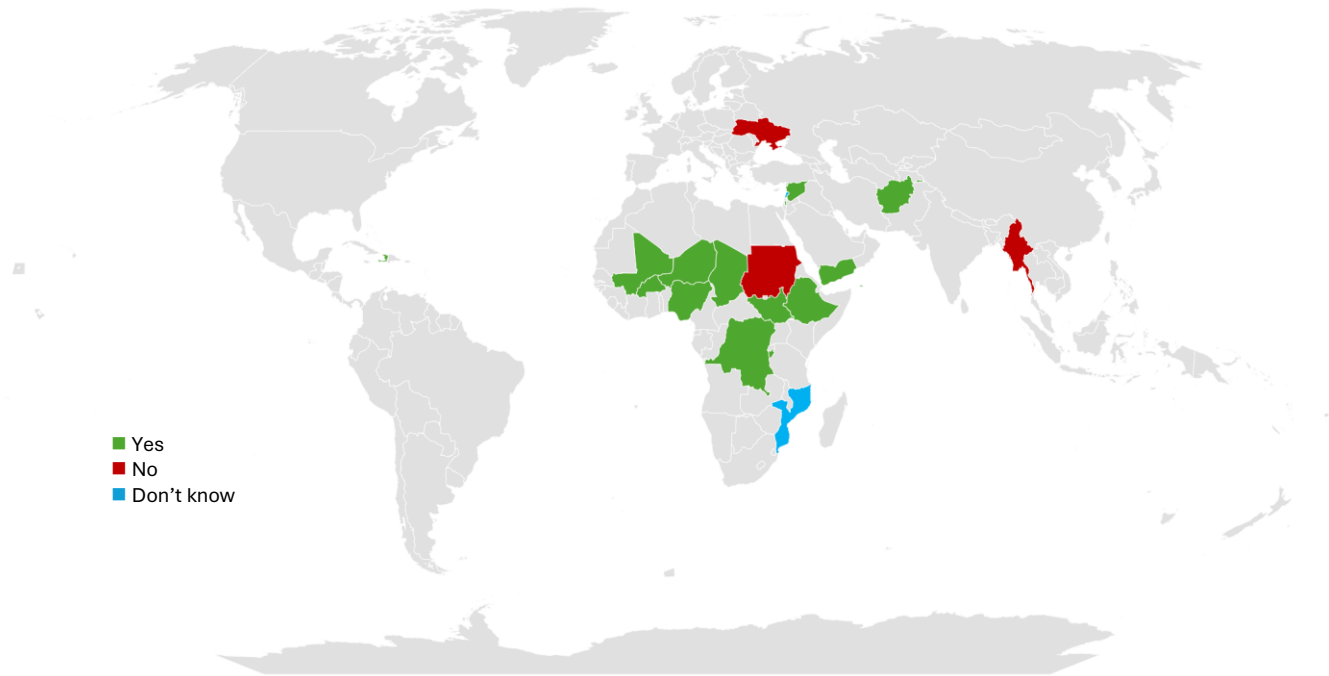


■ Yes ■ No ■ conflicting responses

n = 14 cluster operations who replied Yes to 'Does a functioning PHEOC exist'.

Pandemic Fund

Has your country applied to the Pandemic Fund?

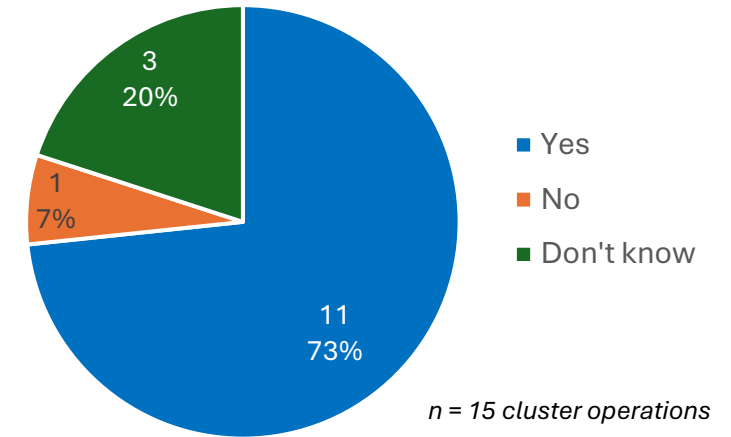


■ Yes
■ No
■ Don't know

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Note on Syria: Only Syria Damascus has answered 'Yes' to this question.
Note on Pacific: the regional HC has applied for PF but is not depicted here.

Are there specific programmes or projects that explicitly target or include affected populations?



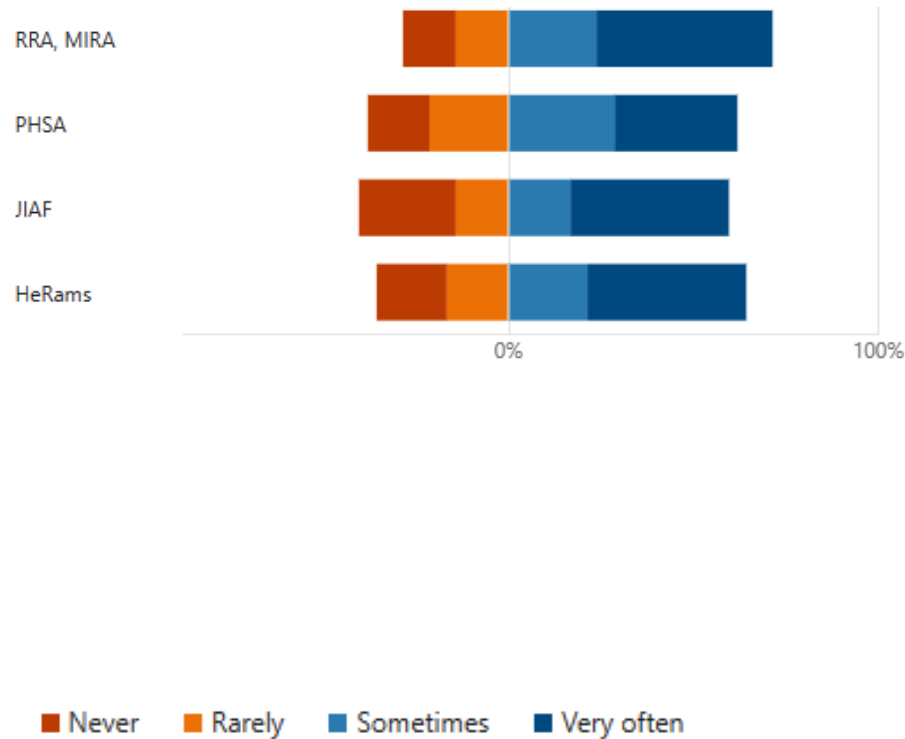
Other donors mentioned by respondents:

World Bank, USAID, BHA, ECHO, Germany, Japan, Global Fund, NHF, Afghanistan Trust Fund

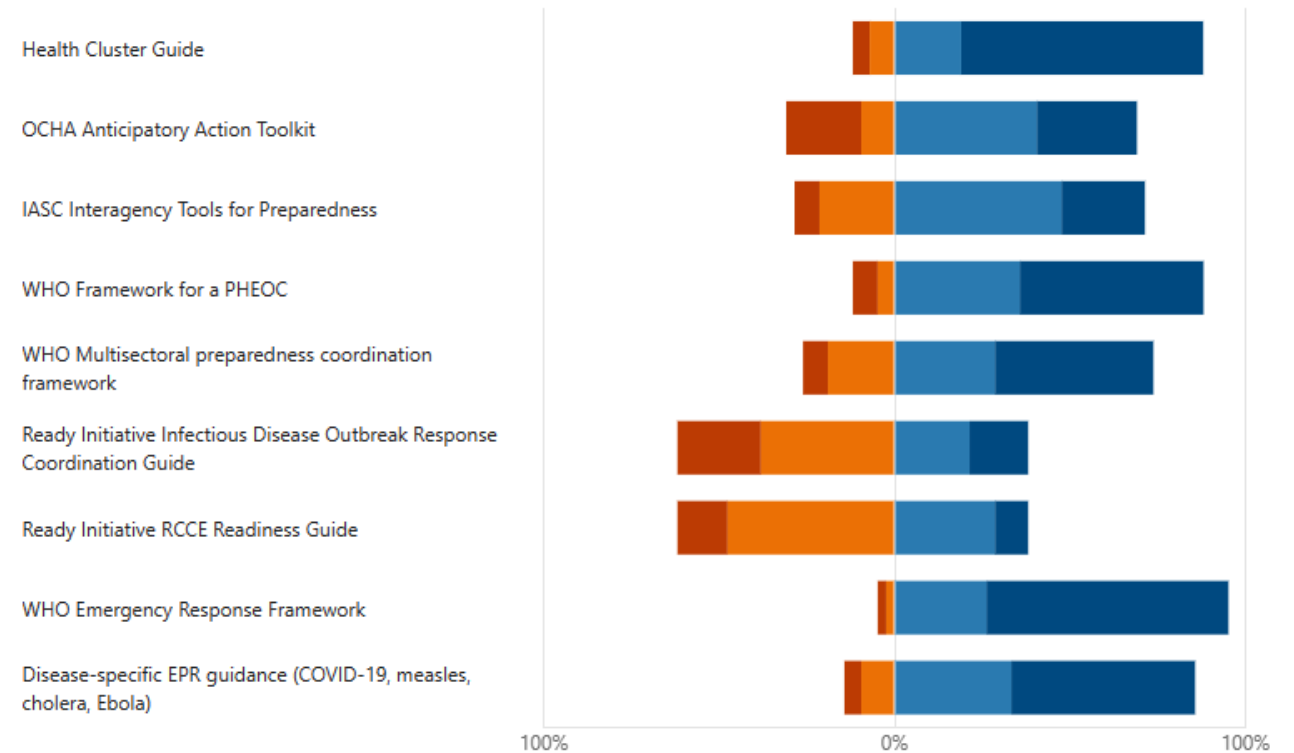
Tools and Resources

Which of the following tools do you use for...?

Assessments

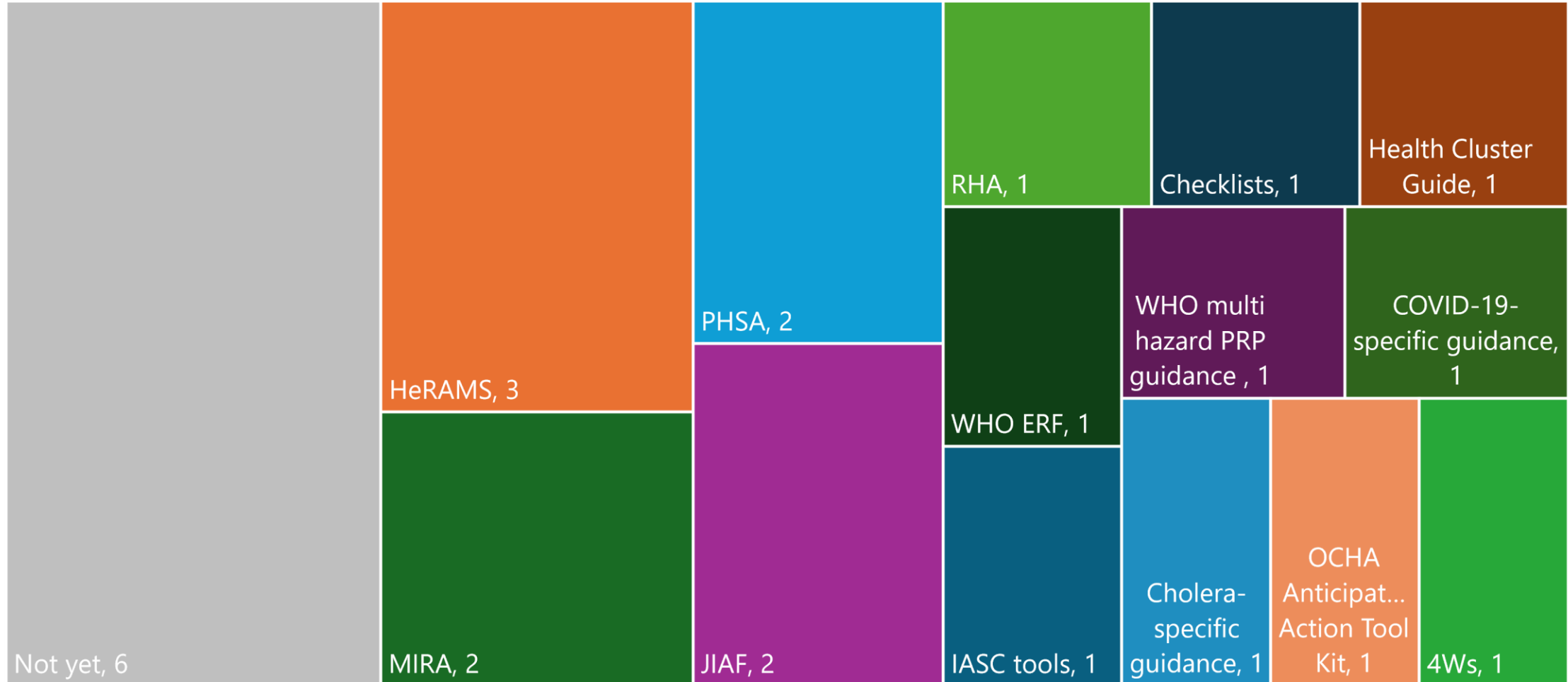


Preparedness and Response Planning



Tools and Resources (contextualization)

Have you been able to adapt and contextualise specific guidance and tools to your operational needs?

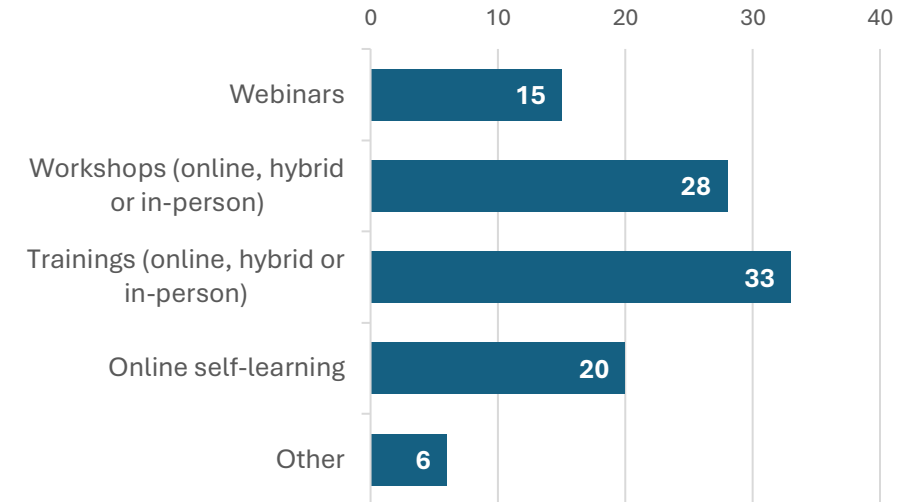


Capacity Building

Are you already providing training on preparedness, hazard-specific or generic, to your partners?

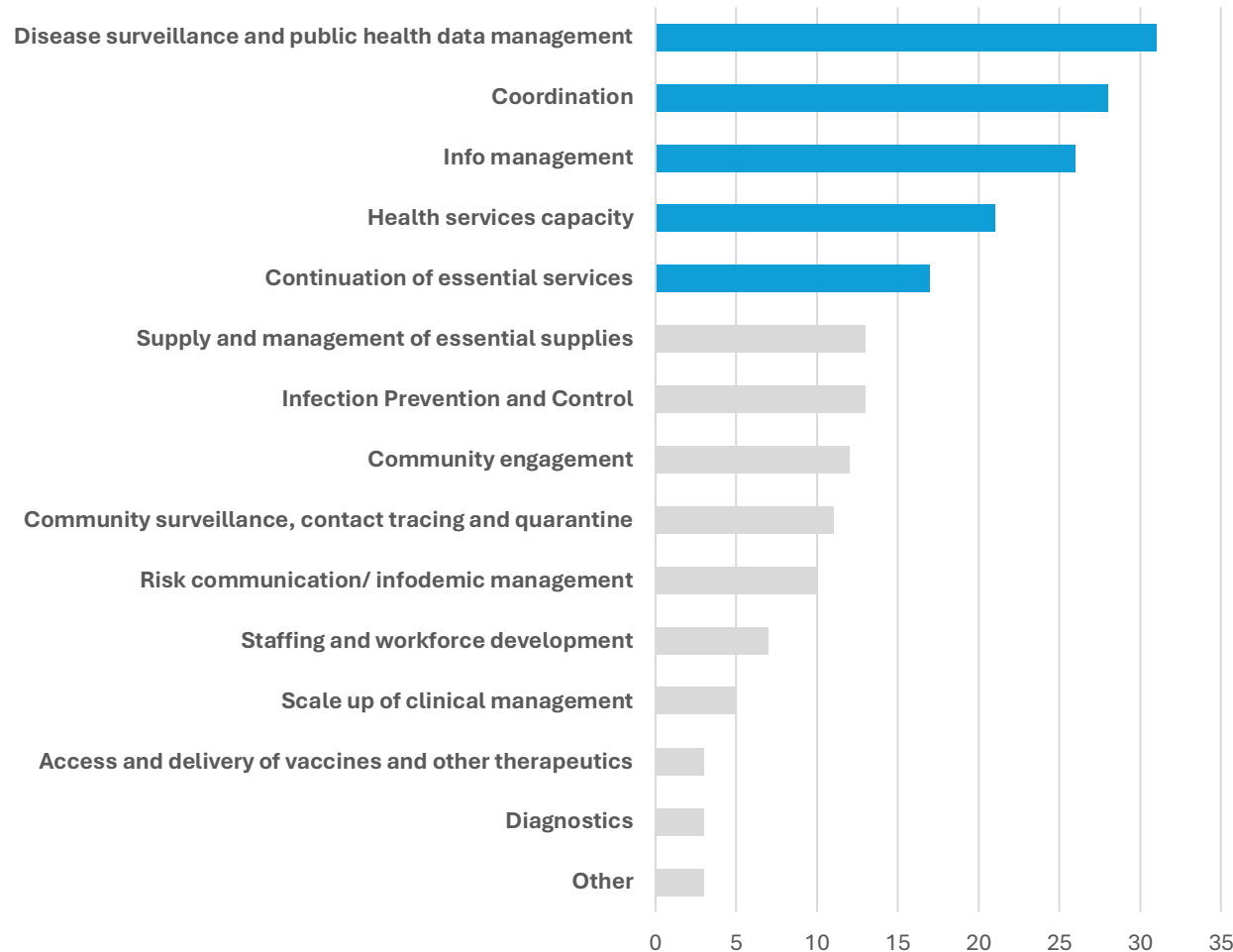
Disease-specific		No funding available for this type of activity, 2		
Cholera, 2	Lassa Fever, 2			
Measles, 2	Cerebrospinal Meningitis, 2	AVoHC Surge training/ Flagship Initiative, 2	Public Health in Emergenc... 1	Project Manageme... Proposal and Report Writing, 1
Diphtheria, 1		STAR exercise, All hazards planning, 1	Risk Assessment and Continge... Planning, 1	AAP, 1
		Data Management and Visualizati... 1	Outbreaks manageme... 1	PSEA, 1
		EWARS, 1	Event-based surveillan... 1	Data monitoring, 1
		4/5Ws, 1		Floods, 1

Which capacity building approaches/ learning methods do you use?



Training needs

Top [Five] priorities for capacity building



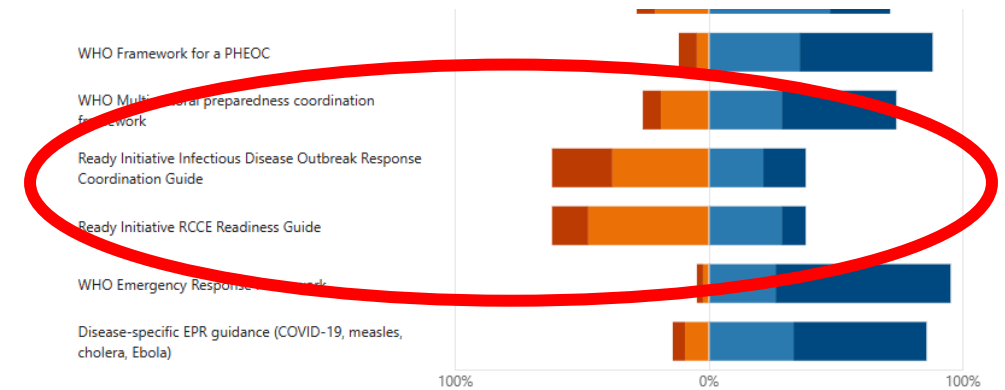
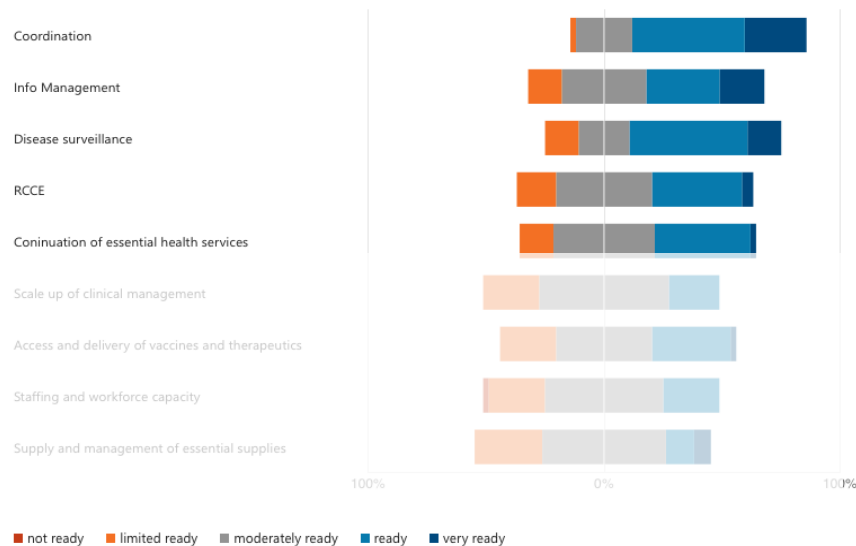
Which support do you need?

- Funding for training
- Training on funding (resource allocation, flexibility)
- Establishment of a mentoring system to support subnational coordinators
- Online preparedness training
- On-site training
- Technical capacity for providing trainings
- Support to local NGOs (project development)
- Training on Health Cluster Coordination for partners
- Contextualising of guidance and tools
- Support to improve quality
- **Training on all-hazard preparedness planning at the Health Cluster Forum**

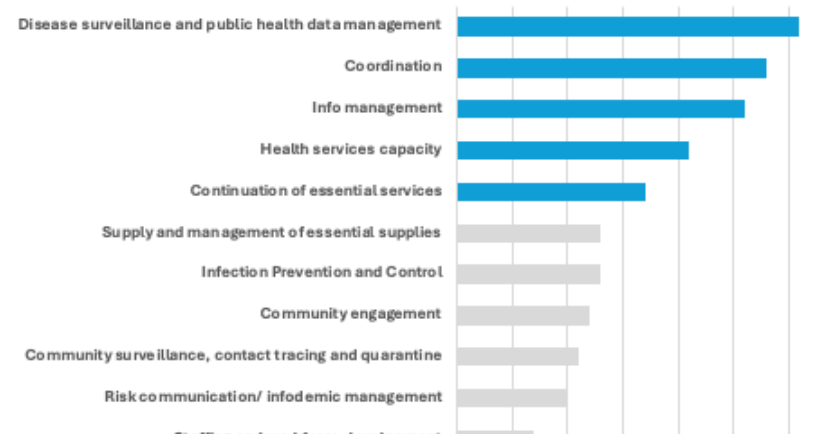
For discussion

- Existing tools
 - READY Initiative Infectious Disease Outbreak Response Coordination Guide
 - READY Initiative RCCE Readiness Guide

- Capacity building priorities



Top [Five] priorities for capacity building

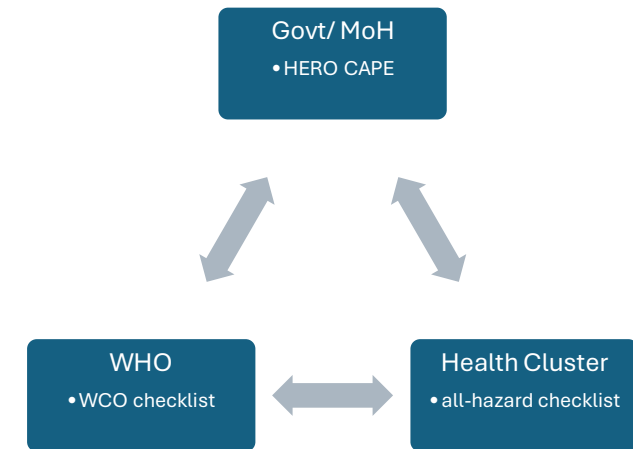


Recommendations

- Support health clusters to sustain and expand on
 - preparedness planning,
 - integration into national plans and funding proposals
- Support Health Cluster Coordinators with
 - targeted and contextualised support to partners
 - develop workplans and priorities for capacity building
 - in collaboration with technical units in WHO develop tailored training modules, and
 - Integrate humanitarian aspects in broader preparedness and readiness tools, including in hazard-specific tools as they are being updated or developed
- Develop specific tools, such as checklists that focus on coordination, multisectoral collaboration and integration of needs in national plans and policies for all hazards.

Work in Progress

- Development of tools
 - All-hazard preparedness checklists
 - Repository of key resources (policy and technical guidance, training resources)
- Collaboration with technical units in WHE
 - WHO Country Office ERF Readiness Checklist
 - Health Emergency Readiness Operation Capacity Checklist
- Mapping of health cluster activities against the HEPR 5Cs

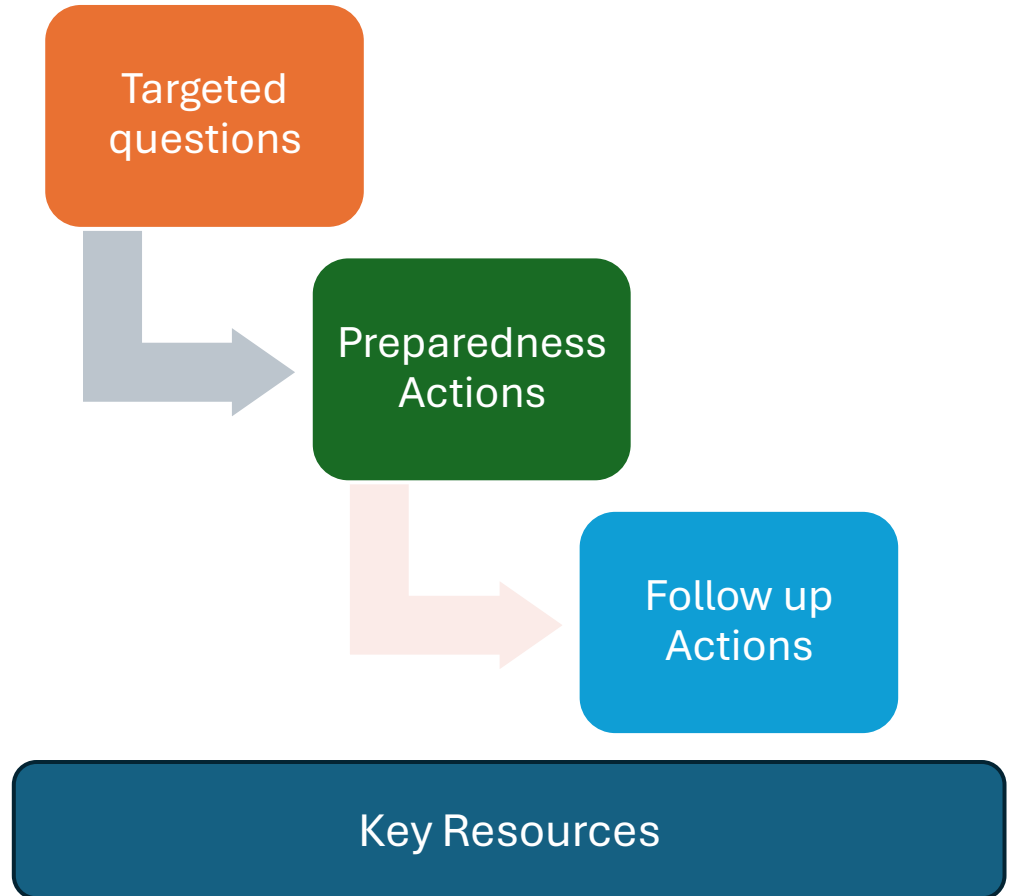


Work in Progress

- Development of tools
 - All-hazard preparedness checklists
 - Repository of key resources (policy and technical)

Modular Checklists

- Preparedness Framework
- Situation Analysis
- Preparedness Planning
- Health System Capacity
- Coordination
- Multisectoral Collaboration
- Community Protection
- Funding Strategies
- [Capacity Building]



Work in Progress

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Work in Progress

- Development of tools
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 - Health Emergency Readiness Op
- Mapping of health cluster activities against the HEPR 5Cs



HEALTH
CLUSTER

COVID-19 response in humanitarian settings - Lessons Learnt and Good Practices Brief 5: Pandemic Preparedness

Alignment of Health Cluster activities with the 5Cs of the HEPR framework

HEPR 5Cs	Key Objectives	Health Cluster Engagement
Collaborative surveillance	Strong national integrated disease, threat, and vulnerability surveillance	<ul style="list-style-type: none">• Integrated situation analysis, including public health surveillance (PHIS, EWARS)
	Collaborative approaches to event detection, risk assessment, and response monitoring	<ul style="list-style-type: none">• Systematic multisectoral needs assessments (MIRA, JIAF)• Systematic mapping of activities to crisis-affected population: Who does What Where (3Ws), When (4Ws) and to Whom (5Ws)• Systematic mapping of health services availability (HeRAMS)
Community protection	Community engagement, risk communication and infodemic management to guide priority actions and strengthen community resilience	Evidence from the studies of the COVID-19 response in humanitarian settings: <ul style="list-style-type: none">• The Health Cluster lead on multisectoral collaboration with all clusters for broad community-based public health interventions is a key achievement and central lesson from the COVID-19 pandemic in humanitarian settings.• Strengthening and supporting national and local partners• Protection mainstreaming and localization with focus on RCCE
	Population and environmental public health interventions	<ul style="list-style-type: none">• Multisectoral efforts on public health and social measures in and with affected communities• Focus on equitable access to vaccination (advocacy, coordination, implementation, monitoring)
	Multisectoral action for social and economic protection	<ul style="list-style-type: none">• Integration of affected populations in national social health protection systems• Advocacy for equitable access to livelihoods, education, and social participation• Protection from vulnerabilities (cash-based interventions)