

**Independent Oversight and Advisory Committee
for the WHO Health Emergencies Programme
Meeting Report**

21st meeting by phone

18 September 2019, 13:50–15:20 CEST

AGENDA AND LIST OF PARTICIPANTS: see Annex

SUMMARY OF DISCUSSIONS

At the Chair's suggestion, members reviewed the agenda and agreed to focus on two items: (1) update from the WHE Programme on the Ebola outbreak in the Democratic Republic of the Congo (DRC) and other ongoing emergencies, and (2) briefing on background and issues related to the AP article on Yemen. The Chair noted that both items should be reviewed in depth at the face-to-face meeting in November.

Update from the WHE Programme

The Incident Management Team provided a briefing on epidemiological update, Ebola operations in the field and key challenges. The IOAC discussed with EXD/WHE and noted the following:

- Overall transmission in the DRC remains substantial (to date, over 3500 cases including 2100 deaths) but there are positive signs in Beni, Mangina and Butembo, where the number of cases has been contained. The risk of spread remains very high at both national and regional levels.
- Operations in the current hotspots (Kalunguta, Mandima and Mambasam) are facing challenges due to armed conflict and community resistance.
- In addition to insecurity, concerns include underreported community deaths, nosocomial infections, and gaps in contact tracing.
- When the response team detects patients and admits them at the ETU, the patients are keen to be enrolled in the MEURI or in the RCT protocols. However, the community is not cognizant of the Ebola therapeutics. A mass campaign to inform the population about the success of the therapeutics should be considered.
- Despite the strong commitment of the UN leadership since May 2019, no significant progress has been made with security and overall operational capacity on the ground.
- Security situation is not improving: in August 2019 there were over 200 security incidents, the worst month on record since the outbreak began in August 2018.
- The reshuffle of the DRC Ebola response leadership has renewed government engagement and brought new energy to the process.
- The Strategic Response Plan for the period July-December 2019 with a total budget of about 400 million, has received positive feedback from donors: out of total ask of US\$186 for WHO (US\$120 million for the Ebola response and US\$60 million for preparedness), WHO has so far received about \$60 million and an additional \$62 million is in the pipeline for the response component. However, donor contributions to Ebola preparedness in the neighbouring countries is critically low.

The Chief of Acute Events Management briefed the IOAC on WHO's response to some other critical emergencies:

- The Bahamas disaster response is being led by PAHO: about 20 dedicated staff are in place and 7 EMTs are operational on the ground. PAHO has issued US\$3.5 million donor appeal and US\$ 1 million of the Contingency Fund for Emergency (CFE) has been released.
- The DRC is also facing a non-Ebola humanitarian emergency and disease outbreaks including cholera, malaria, measles and polio. Two rounds of mass cholera vaccination campaign have been recently conducted in Kasai area reaching over 1.2 million people. WHO has released \$500 000 from the CFE and deployed a dedicated health sector coordinator in Kinshasa and Goma.
- WHO is responding to the humanitarian crisis in north-eastern Nigeria and managing the disease outbreaks. Given the deteriorating situation and increasing movement of the population due to Boko Haram 's attacks, WHO is focusing to sustain the response capacity to acute events and enhance mobile teams.
- Concerns are rising over the ungraded emergency in the Sahel and a task force has been established under the leadership of ADG/WHE for preparedness. WHO's key activities include establishing a coordination hub in Dakar and strengthening the Country Offices in the areas.

AP article on Yemen

In August 2019, IOAC members were notified of an article on the Associated Press about several allegations against the WHO Country Office (WCO) in Yemen. WHO subsequently released a statement in response. The newly appointed WR for Yemen was invited to provide a briefing to the IOAC on the background, current situation and follow-up actions.

The WR noted that Yemen is facing a large-scale humanitarian crisis and outlined the complexity of the geopolitical situation and the insecure environment in which WHO has to operate. The WR clarified that WHO has a range of internal control frameworks and mechanisms and that the audit of the WCO Yemen was initiated by the Organization itself in 2018. That audit made preliminary recommendations, including the suspension of contracts with some local implementing partners, and identified conflicts of interest and other matters of suspected wrong-doing by staff. The IOAC was informed that these investigations are still ongoing. The Secretariat is committed to sharing outcomes of the investigations with the IOAC through the Internal Oversight Services.

A Yemen management action plan has been developed with the aim to improve the WCO's effectiveness in the areas of administration, finance, human resources, emergency response, operational partnerships and procurement. WHO is committed to fully implementing all 73 recommendations in the action plan by the end of 2020.

The IOAC was also briefed on progress with implementation of the longer-term health programme and coordination of the health cluster. Currently WHO's operation in Yemen is under extreme scrutiny and donors' decision to suspend funding may result in halting life-saving operations in one of the world's biggest humanitarian crises. Noting the risk inherent in operating in fragile states, ADG/WHE emphasized the importance of strengthening the WCO with appropriate capacities to ensure that programme implementation is transparent and free of collusion, fraud, and corruption.

Members agreed to look into relevant issues which may impact the WHE Programme's performance at the face-to-face meeting in November, including:

- WHO's procedure to bring the audit and related findings to the attention of donors
- Effectiveness of business processes and use of fast-track measures in emergencies
- Benchmarks with other UN internal control mechanisms and prevention measures

- Risk assessment and management in operating in fragile states
- Prerequisite and minimum WCO capacity for managing large emergency operations
- Corporate communication strategy (risk communication and media relations)

The Chair reiterated that the analysis should be pertinent to the IOAC's mandate and requested the Secretariat to provide further updates and supporting documents for the IOAC review.

Other topics and next steps

The GPMB Secretary joined the call to announce that the GPMB will launch its first report on 22 September and to thank IOAC members for their contribution to the report. The IOAC paper commissioned by the GPMB has been published on the GPMB website together with six other thematic papers.

The IOAC Secretary announced the IOAC plan to hold a back-to-back in-person meeting at WHO Headquarters in Geneva on 7-8 November following a field mission to Turkey on 3-6 November which will be conducted by three members. The Chair proposed a dedicated call in October to prepare for the field mission. The IOAC Secretariat will follow up.

End

Annex 1. Agenda

Wednesday 18 September, 13:50 – 15:20 CEST

13.50-14.00 Welcome and opening remarks by the Chair

14.00-14.20 Briefing from the WHE programme by EXD/WHE

- Ebola outbreak in DRC by Rob Holden, HQ Ebola Incident Manager
- Other major emergencies by Tom Grein, Chief Acute Event Management
- Q&A

14.20-14.50 Update on the Yemen issue by WR Yemen

- Background, actions taken, current situation
- Q&A

14.50-15.10 Additional agenda items

- Update on the GPBM report by GPMB Secretary
- Workplan Sept 2019 – May 2020 and the upcoming activities
- Preparation of Turkey Mission 3-6 November and a back to back meeting in Geneva 7-8 November

15.10-15.20 Wrap up

- Summary of recommendations, decisions and action points
- Concluding remarks by the Chair and ADG/WHE

Annex 2. List of participants

IOAC

Dr Walid AMMAR

Dr Hiroyoshi ENDO

Dr Geeta Rao GUPTA

Dr Felicity HARVEY (Chairperson)

Mr Jeremy KONYNYDYK

Ms Precious MATSOSO*

Dr Theresa Tam

WHO Secretariat

Dr Marie Amelie DEGAIL, Health Emergency Information and Risk Assessment, WHE

Mr Hatem EL KHODARY, Director Administration and Finance, EMRO*

Ms Jane ELLISON, Executive Director, External Relations and Governance*

Mr Thomas GREIN, Chief, Acute Events Management

Dr Francis GRENIER, Management Officer, WHE

Mr Robert HOLDEN, Incident Manager, WHE

Dr Jaouad MAHJOUR, Assistant Director-General, WHE

Mr Altaf MUSANI, WR Yemen

Ms Munjoo PARK, IOAC Secretary

Mr Alex ROSS, GPMB Secretary

Dr Mike RYAN, Executive Director, WHE Programme

Dr Bernhard SCHWARTLÄNDER, Chef de Cabinet*

Mr David WEBB, Director, Internal Oversight Services*

* unable to join