# WHO HEALTH EMERGENCIES (WHE) PROGRAMME SAVING LIVES, PROTECTING PEOPLE

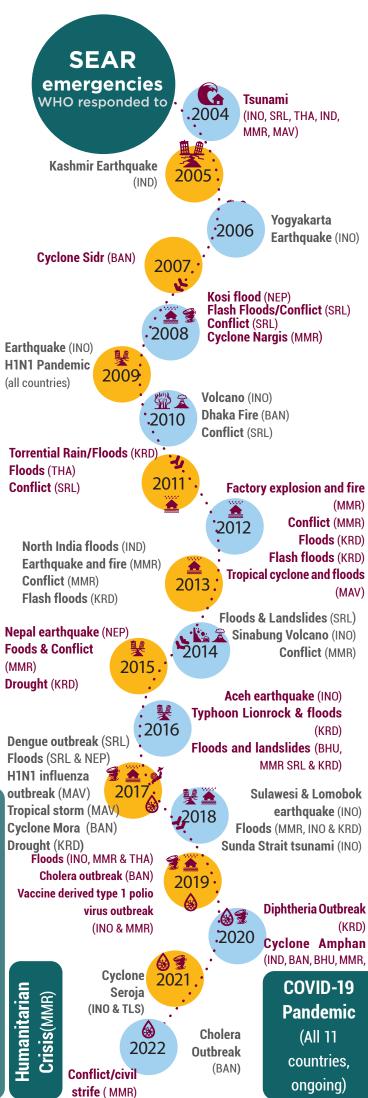


Dr Poonam Khetrapal Singh, Regional Director, WHO South-East Asia Region visiting a hospital in Sri Lanka.

The WHO Health Emergencies (WHE) Programme is WHO/ SEARO's emergency arm. The programme works with all 11 countries and partners, ensuring the South-East Asia Region is well prepared to respond to emergencies. WHE works with Member States and other partners to strengthen their health system resilience to emergencies. In collaboration with other operational partners, it may act as a healthcare provider as the last resort in certain humanitarian settings, like in Cox's Bazar, Bangladesh. WHE develops strategies, plans and interventions based on guidance from the World Health Assembly (at the global level) and WHO Regional Committee for South-East Asia (at the Regional level). At the country level, it supports early detection, assessment and timely communication of health security threats. It ensures interventions are prioritized and implemented in line with the national health policies, strategies and plans. As custodian of the International Health Regulations (IHR) (2005), WHO facilitates IHR event communication. WHO also convenes all stakeholders under the health cluster during emergencies.



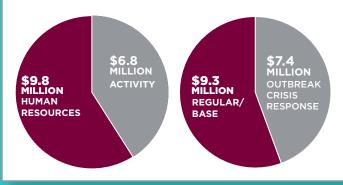
<sup>1</sup>1. Bangladesh (BAN), 2. Bhutan (BHU) 3. DPR Korea (KRD) 4. India (IND) 5. Indonesia (INO) 6. Maldives (MAV) 7. Myanmar (MMR) 8. Nepal (NEP) 9. Sri Lanka (SRL) 10. Thailand (THA) 11. Timor-Leste (TLS)



## **DISTRIBUTION: Work, Resources**

In 2020-2021 WHO mobilized US\$ 16.7 million: 56% was used to support the COVID-19 outbreak, followed by human resources (31%) and activity support (13%) for regular programmes. For an Agency that provides technical advice to Member States, the apparent high spending on HR is reasonable. WHE works closely with country offices providing technical and operational support to the countries.

#### **Funds Received and Spent**



### **SEARHEF: Swift Funding**

In addition to regular resources and donor funding, WHE swiftly mobilizes funds from the South-East Asia Regional Health Emergency Fund (SEARHEF) in the event of disasters and crises. Established and managed by the Regional Office, SEARHEF has been critical in health emergency response, mitigating death and suffering. It also complements relief, long-term recovery, reconstruction and rehabilitation work.



SEARHEF used by countries to meet urgent health needs during emergencies; since establishment in 2007 till July 2022.

# **WHE Work Streams**

WHE was created in 2016, a culmination of several years of emergency work. What started with the 2003 global SARS outbreak and the 2004 tsunami was followed by disasters and pandemics like avian influenza and H1N1 (swine flu), finally culminating in COVID-19 to which the WHE team responded robustly. Key units that support WHE:

#### **EMERGENCIES, OPERATIONS & LOGISTICS (EMO)**



The Emergency Operations (**EMO**) unit closely coordinates with WHO country offices, headquarters and partners. Alongside the CPI, EMO provides operational, procurement, warehouse facility, shipping, and logistics support in a fast-track mechanism, responding to emergencies. Currently EMO's largest

response operation, besides COVID-19, is ensuring some 1.3 million Rohingyas living in Cox's Bazar have access to health services. EMO ensures implementation of Incident Management System through Health Emergency Operations Centres (HEOCs), builds and mobilizes operational partnerships for effective emergency response.

#### **COUNTRY PREPAREDNESS & IHR (CPI)**



Country Preparedness and International Health Regulation (**CPI**) unit functions as the Region's IHR secretariat, helping IHR compliance, peer-to-peer learning, sharing of experiences, ideas, and best practices. CPI also serves as a Regional Secretariat for various review committees and working group related to IHR and health security. It assesses

national IHR capacity through the IHR M&E framework, including mandatory State Party Annual Reporting (SPAR), and other mechanisms. It also provides assistance in strengthening operational readiness at local health system levels as well as in developing national action plans for health security.

#### HEALTH EMERGENCY INFORMATION AND RISK ASSESSMENT (HIM)



Health emergency information and risk assessment (**HIM**) unit provides authoritative information for decision making in emergencies, with responsibility for identifying and verifying new public health events, monitoring epidemiological situation and public health response, assessing

risks to public health, and communicating timely health emergency information. The unit conducts collaborative public health intelligence activities, running regional eventbased surveillance, facilitating IHR event communication and conducting relevant analytics. The HIM unit also supports countries to strengthen systems and capacities for surveillance, risk assessment and field epidemiology to manage health security threats.

#### INFECTIOUS HAZARDS MANAGEMENT (IHM)

Infectious Hazards Management **(IHM)** unit contributes to the "all-hazard approach" by mitigating risks of biological hazards, developing Regional risk mitigation plans, frameworks and tools. The team works with expert networks to detect, understand and manage new and emerging high-threat



infectious hazards. It helps build capacities of Member States in managing high-threat infectious hazards, including implementation of the Nagoya protocol. IHM also supports implementation of the Pandemic Influenza Preparedness (PIP) Framework.

#### ZOONOSES, FOOD SAFETY & ONE HEALTH

The **Zoonoses, Food Safety and One Health** unit focuses on preparedness and response for epidemic and pandemic prone emerging infectious diseases, 75% of which are of animal origin. The team promotes a holistic 'One Health' approach that integrates health of people, animals and ecosystems. Food



safety is intrinsic to this approach. The team supports Member States strengthen their national food control systems and mitigate public health risks from food markets by preventing emerging zoonotic diseases. It also provides technical support to countries under the Codex Trust Fund, ensuring safe food for all..

#### LABORATORY AND DIAGNOSTICS (PHL)

The Public Health Laboratory (**PHL**) unit supports implementation and monitoring of policies, strategies and laboratory programmes related to infectious diseases of epidemic and pandemic potential, including antimicrobial resistance. PHL experts oversee implementation of the South-



East Asia Regional Roadmap for Diagnostic Preparedness, Integrated Laboratory Networking and Genomic Surveillance (2023–2027) which provides strategic technical guidance to increase political commitment, investments and highlevel partnerships to modernize diagnostics, laboratory and surveillance systems with strong early warning functions.

#### **MANAGEMENT & ADMINISTRATION (MGA)**

The Management & Administration (**MGA**) unit provides effective management and administrative support across WHE teams, ensuring all emergency operations are rapidly and sustainably financed and staffed. It also provides risk assessment, contract management, quality checks, data

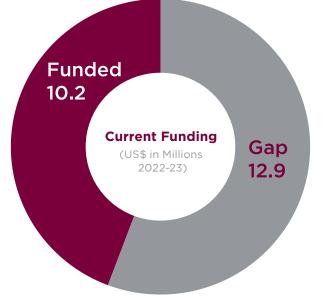


management, data analysis, web portal management and supports governance issues management and supports governance issues.

# << CHALLENGES

The COVID-19 experience has revealed resilience, strengths, good practices as well as gaps in the Region's preparedness and response to health emergencies.

- The Region is vulnerable to multiple hazards. With climate change, rapid urbanization, social media and socio-political challenges, the frequency, intensity and complexity of health emergencies have increased.
- Limited IHR core capacities at national and sub-national levels, and challenges in timely sharing of information.
- Limited financial resources allocated for the regular WHE programme. Lack of sustainable and predictable funding for regular activities.



# WAY FORWARD >>

The Regional Strategic Road map for Health Security and Health Systems Resilience (2023-27) suggests ways forward:

- Find ways to close IHR core capacity gaps identified in handling COVID-19. Strive for PHC-oriented resilient health systems enabled by digital technology and local manufacturing, ensuring equitable access to emergency services.
- Support Member States to review and update the national action plan on health security (NAPHS).
- Support Member States to strengthen country capacity in critical areas of emergency.
- Broaden partnership and collaboration to build national capacity and exchange knowledge, tools, good practices, and lessons learnt, and to enhance regional alert systems through collaborative public health intelligence.



During the 2015 Nepal earthquake.

DONORS		
CDC CDC/USA	France	Norway
DFAT/Australia	Germany	Saudi Arabia
Canada DFATD/Canada	Italy	UKaid
European Union	Japan	USAID

Additional Resources:

- SEARHEF: <u>https://www.who.int/southeastasia/</u> outbreaks-and-emergencies/searhef/whatssearhef
- Programme & Budget: <u>https://open.who.</u> <u>int/2022-23/home</u>



Website: <u>https://www.who.int/southeastasia/</u> outbreaks-and-emergencies Email: searwhe@who.int