



**CENTRAL FUND FOR INFLUENZA ACTION**

**FINAL NARRATIVE REPORT  
CFIA – A8 (PIC OCHA)**

<p><b>Participating UN Organization(s)</b> <i>(if joint programme, indicate the lead agency)</i></p> <p><b>UN Office for the Coordination of Humanitarian Affairs (OCHA).</b></p>	<p><b>Country and Thematic Area</b></p> <p><b>West Africa as part of UNCAPAHI Objective: 6 “Continuity under pandemic conditions”.</b></p>
<p><b>Programme/Project Title</b></p> <p><b>Pandemic Influenza Contingency (PIC), West Africa regional platform.</b></p>	<p><b>Programme/Project Number</b></p> <p><b>Programme number: 67384 ATLAS No. 55384 CFIA-A8</b></p>
<p><b>Programme/Project Budget</b></p> <p>CFIA: <b>\$320,000</b> USD</p> <p>Govt. Contribution: USD</p> <p>Agency Core:</p> <p>Other: <b>\$9,199</b></p> <p><b>TOTAL: \$329,199</b> USD</p>	<p><b>Submitted by</b></p> <p>Name, Title: <b>Mr. Ian Clarke</b></p> <p>Organization: <b>PIC OCHA</b></p> <p>Contact Information: <b>clarkei@un.org</b></p>
<p><b>Final Programme/ Project Evaluation</b></p> <p>Evaluation Done: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Evaluation Report Attached: <b>Yes</b></p>	<p><b>Programme/Project Timeline/Duration</b></p> <p>Overall Duration <b>1 year (Jan – Dec 2008)</b></p> <p>Original Duration <b>1 year (Jan – Dec 2008)</b></p> <p>Programme/ Project Extensions <b>N/A</b></p>

## **FINAL NARRATIVE REPORT**

### **I. Purpose**

#### **a. Provide the main outcomes and outputs of the programme**

Outcome: UN country teams in West Africa more ready to maintain essential operations and assist their national host governments

Output: PIC-backed UN basic measurement of national pandemic readiness updated well for over 14 West African countries

Outcome: Greater awareness in West Africa of the need to prepare for a high mortality influenza pandemic.

Output: At least 7 UN country teams in West Africa assisted to support their national governments with pandemic preparation, including simulations

Outcome: Governments in West Africa improve their preparedness for a sudden pandemic

Output: Key presentations made at 2+ regional and sub-regional organisations' high level meetings advocating multi-sector pandemic preparedness.

Outcome: Governments, UN and partners in West Africa prepared to support humanitarian response in a pandemic.

Output: Regional platform of the key actors in AHI organised and maintained, covering participants from over 14+ countries

Outcome: In the event of WHO Pandemic Phase 4, 5 or 6 being declared the UN performs well in assisting governments to face the situation in a broad multi-sector fashion.

Output: Best practices in pandemic readiness widely disseminated to key actors in easy-to-absorb forms in 14+ countries.

Output: National disaster risk mitigation focal points lobbied in at least 14+ countries to advocate inclusion of preparedness for a sudden pandemic in disaster risk reduction work.

#### **b. Explain how the programme relates to the UN Consolidated Action Plan and its objectives and is in line with the CFIA TOR**

OCHA is the lead agency for UNCAP objective 6, Continuity under pandemic conditions. The activities of this project are fully aligned with purpose 6.1 of the UNCAP: contingency planning for continuity of operations during a pandemic, including preparation for humanitarian actions under pandemic conditions (WHO alert phases 5 and 6)

The OCHA Pandemic Influenza Contingency West Africa regional platform helped UN country teams of the region to develop and maintain robust plans to protect their staff health and safety, maintain essential operations and help Governments in a pandemic.

PIC in West Africa also supported and helped UN country teams in West Africa to assist national Governments to prepare for pandemic, beyond the health sector. PIC coordinated the preparedness of humanitarian actors in the region to deliver humanitarian assistance to vulnerable groups in a pandemic.

**c. Indicate the main implementing partners, their roles and responsibilities, and their interaction with the Participating UN or Non-UN Organization**

The UN Country Teams of the West Africa (UNCTs) region are the main implementing partners. UNCTs are responsible for pandemic preparedness planning, integrating pandemic into existing planning/preparedness structures, implementing lessons learned and best practices provided by OCHA PIC and other partners on pandemic related issues. UNCTs had to identify gaps in pandemic preparedness for the UN system and national government and liaise with OCHA PIC for appropriate support.

**II. Resources**

***1. Financial Resources:***

**1.1. Provide information on other funding resources available to the programme, if applicable.**

This project was almost fully funded by CFIA (97%) with remaining 3% funded by other donors (through OCHA).

**1.2. Provide details on any budget revisions approved by the appropriate decision-making body, if applicable**

The initial budget for the whole project was USD 391,796. The budget was revised and reduced to USD 329,199 due to the delayed recruitment of the Regional Planning Officer. The CFIA-funded component of the budget remained constant.

***2. Human Resources:***

**2.1. National Staff: Provide details on the number and type (operation/programme)**

This project had a total number of 3 national staff (One national Officer, one driver and one part-time administrative-secretary to help the national officer in organizing regional events like simulation exercises and regional platform meetings)

**2.2. International Staff: Provide details on the number and type (operation/programme)**

One international staff on P/L-4 level (Regional Planning Officer) who acted as project manager and was responsible for planning the project, liaising with UN RCs of the region and coordinating with partners active in pandemic preparedness at the national and regional levels.

**III. Implementation and Monitoring Arrangements**

**3.1. Summarize the implementation mechanisms primarily utilized and how they are adapted to achieve maximum impact given the operating context.**

PIC's overall goal in 2008 was to support implementation of the multi-sector elements of the Chairman's Proposed Road Map from the New Delhi Conference on Avian and Pandemic Influenza, 4-6 December 2007 through its simply summarised strategy to 'Measure, Advocate and Help'

**3.2. Improving measurement of worldwide pandemic preparedness**

PIC used a web-based system to measure the capacity of UN country teams and national governments to mitigate the impacts of a pandemic. This system helped identify countries and areas that are least well-prepared (according to standard indicators) and to prioritize our assistance and advocacy efforts accordingly.

**3.3. Advocacy**

PIC advocated for pandemic preparedness at all levels by highlighting non-health consequences of the

pandemic during important events and meetings globally, regionally and at country levels with the UN, Governments, regional bodies and other relevant partners. Assisting with simulations was essential to the credibility of the advocacy and measurement effort.

### **3.4. Help**

At a country level, PIC in West Africa provided technical support to the process of incorporating pandemic planning into national disaster management structures. PIC helped UNCTs of the region with contingency planning and assistance to national pandemic preparedness.

At a regional level, PIC in West Africa maintained a regional platform which brought together regional AHI actors to coordinate their activities, agree on priority needs and gaps and avoid duplication.

### **3.5. Provide details on the procurement procedures utilized and explain variances in standard procedures**

The CFIA funds received covered staff, travel, translation and workshop costs. Standard UNDP procurement procedures were used in all cases.

### **3.6. Provide details on the monitoring system(s) that are being used and how you identify and incorporate lessons learned into the ongoing programme**

A web-based system to measure preparedness is the main monitoring tool used to identify gaps and incorporate lessons learnt into the ongoing project. **In addition, we have a standard evaluation form that is used at all simulation exercises so we can keep track of the success of our simulation effort and improve our package in the light of feedback.**

### **3.7. Report on any assessments, evaluations or studies undertaken in the reporting period or plans to undertake assessment/evaluation**

N/A

## **IV. Results**

### **4.1. Information in this section includes - An assessment of the extent to which the programme component is progressing in relation to the outcomes and outputs expected for the reporting period**

Despite a difficult environment of competing priorities, the project was successful in its advocacy efforts and was able to generate increased interest around pandemic preparedness among humanitarian partners as well as inter-governmental institutions like ECOWAS.

UN country teams used PIC tools to assist improvements in national readiness in 10 countries (target of 7).

ECOWAS included pandemic preparedness on its September meeting agenda.

PIC conducted simulation exercises to improve the plans of the UN country teams in Gambia and Senegal.

### **4.2. Main activities undertaken and achievements**

PIC provided technical support to UNCTs in the region in updating their contingency plans and in integrating pandemic preparedness into existing UNCT and governmental disaster management structures. The following UNCTs were particularly supported during the reporting period: Senegal, Niger, Nigeria, Gambia, Liberia, Guinea, Togo, Benin, Burkina Faso, Cap Verde, Mali, and Guinea Bissau

PIC WA successfully facilitated simulation exercises to test if the AHI plans are operational and functional in Senegal and Gambia and prepared simulations for early 2009 in Nigeria, Togo and Benin.

PIC WA successfully organized 4 AHI regional platform meetings to promote coordination among over 15 organisations working on avian and pandemic influenza preparedness in West Africa, including WHO, CDC, WFP, UNDP, OCHA, IOM, AED, IFRC, USAID, ECHO, CRS, CDC, the government of Senegal, French Technical Cooperation and the Pasteur Institute.

PIC undertook three missions to Mali to provide technical support to the Malian government in developing pandemic preparedness plans and to prepare a regional simulation exercise involving military participation from several ECOWAS countries.

PIC advocated why it is important to and how one should best go about including pandemic influenza in national disaster management structures during a Regional Workshop organized by FAO in May; about 40 representatives from 13 countries participated in this event.

The Regional Planning Officer (RPO) participated in the ECOWAS Avian Influenza Control Expert meeting in Abidjan, Cote d'Ivoire in September. In his presentation at this regional meeting he advocated for the need of ECOWAS member states to involve all sectors of society in pandemic preparedness. OCHA made recommendations aimed at improving national pandemic preparedness and the meeting adopted these recommendations as part of the final meeting report.

PIC staff participated in the West Africa Regional Consolidated Appeals Process (CAP) workshop to formulate the CAP for 2009. The CAP 2009 focuses on addressing the humanitarian consequences of natural disasters, infection disease outbreaks and the effects of the increase in global food prices. The appeal mentions pandemic influenza as a threat within the worst case scenario. Such an extreme scenario would lead to multiple breakdowns in already weak critical public infrastructure systems and cause increased levels of acute malnutrition, displacement and excess mortality.

PIC completed the update of the AHI Website on the OCHA ROWA site and a link to the PIC global guidance and assessment website was placed on the site as well as relevant resources and contact lists. Following the AHI platform meeting on October 28, the "WHO DOES WHAT WHERE" maps were updated and placed on the website.

#### **4.3. Implementation constraints, lessons learned from addressing these and knowledge gained in the course of the reporting period.**

The delayed recruitment of the PIC Regional Planning Officer (L-4) made it challenging for the National Officer to maintain all the planned activities, but the support provided by the PIC team in Geneva mitigated this constraint. The demand for PIC support at the country level remained high with acceleration in activity planned for 2009.

It remains relatively challenging to persuade UN country teams and Governments in the region to give serious attention to pandemic preparedness given the relative lack of avian influenza incidents in the region and the range of other severe problems, for example poverty and conflict, facing many West African countries. The PIC regional hub in close collaboration with PIC Geneva is continuously looking for the most effective ways to address this challenge and use innovative avenues to improve the state of pandemic readiness in West Africa.

#### **4.4. Key partnerships and inter-agency collaboration: impact on results. Explain synergies fostered with Participating UN Organization(s), and activities undertaken jointly with Participating UN Organization(s)**

- IFRC used PIC tools in a simulation with the Guinean government on pandemic influenza.
- The PIC regional platform has facilitated common planning, regional networking and joint missions of partners on pandemic issues. This included a PIC-OCHA /IFRC joint mission to

Bamako (Mali) within the framework of the USAID "Humanitarian Pandemic Preparedness" (H2P) initiative.

#### **4.5. Other highlights and cross-cutting issues pertinent to the results being reported on.**

N/A

### **V. Future Work Plan**

#### **5.1. Information in this section includes - Priority actions planned for the following reporting period to overcome constraints, build on achievements and partnerships, and use lessons learned during the previous reporting period.**

PIC West Africa's priority agenda for 2009 consists of the following:

- a. To undertake 7 simulation exercises, including at least 3 with Governments. To follow up on these after three months. To secure at least 3 implemented changes to plans in the aftermath of each exercise.
- b. To support 2 country teams to improve their pandemic contingency plans using the simplified PIC planning framework. To follow up after three months. To secure at least three implemented preparedness actions from each planning process.
- c. To deliver 4 presentations on multi-sectoral pandemic preparedness of meetings of regional bodies or Governments. To secure at least one item of positive written feedback from each presentation.
- d. To organise three regional meetings of pandemic preparedness actors in which 14 countries participate. To secure at least one example of new collaboration among participants from each meeting.
- e. To lobby 8 national disaster management focal points to include pandemic in national disaster plans, processes and structures. To secure progress on integration from at least 2 countries.
- f. To secure at least 2 wider UN missions on multi-hazard contingency planning or disaster risk reduction that include pandemic as a mainstreamed component.
- g. To support the publication of 3 new Business Continuity Plans for OCHA regional or country offices.
- h. To update the PIC tracker website data for 8 UN country teams and 4 national governments.

#### **5.2. Indication of any major adjustments in the strategies, targets or key outcomes and outputs planned in the programme.**

N/A

#### **5.3. Estimated Budget required (including any major funding shortfalls).**

The original budget for PIC WA for 2008 was **USD 391,976** and this amount was revised down to **USD 329,199** due to the delayed recruitment of an international staff member on P/L-4 level.

The CFIA contribution was USD 320,000 and OCHA covered the difference (**USD 9,199**) from other resources.

#### IV. INDICATOR BASED PERFORMANCE ASSESSMENT

	Performance Indicators	Indicator Baselines	Planned Indicator Targets	Achieved Indicator Targets	Reasons for Variance (if any)	Source of Verification	Comments (if any)
<b>UNCAPAH I Objective 6<sup>1</sup></b>							
<b>UNCAPAH I Output 1.1</b>	Indicator 1.1.1	Simulations conducted to assist in preparation and testing of contingency and continuity plans.	7	2	Difficulty in persuading UNCT's and Governments to give time to pandemic during conflicting real emergencies.	PIC monthly reports.	
	Indicator 1.1.2	Advocacy with regional and sub-regional bodies to put pandemic planning on their agendas.	3	4		PIC monthly reports	
	Indicator 1.1.3	Conduct of Regional Platform meetings on pandemic preparedness.	4	4		PIC monthly reports	
	Indicator 1.1.4	Number of UNCT's that have showed a	2	4		PIC online readiness tracker (self-assessment	

<sup>1</sup> From UNCAPAH I (see h <http://mdtf.undp.org/document/download/4117>).

		marked % increase in overall level of pandemic preparedness.				tool for use by UNCT's to track levels of preparedness).	
	Indicator 1.1.5	secure at least 2 wider UN missions on multi-hazard contingency planning or disaster risk reduction that include pandemic as a mainstreamed component	2	3			
	Indicator 1.1.6	Support the publication new Business Continuity Plans for OCHA regional or country offices.	3 regional / country offices	0		Lack of interest from OCHA offices and senior management	This activity will be carried forward into 2009
	Indicator 1.1.7	Update the PIC tracker website data	8 UNCT's and 4 National Governments	12 UNCT's and 6 Governments		PIC online readiness tracker (self-assessment tool for use by UNCT's to track levels of preparedness).	