Introduction

Mr. Mark Lowcock, the Emergency Relief Coordinator (ERC) and Chair of the IASC, convened an ad hoc IASC Principals meeting to discuss the COVID-19 response, including an update on the health situation and logistics.

The ERC expressed his appreciation to the Principals for the discussion at the IASC biannual meeting on 24 June, which UN Secretary-General Guterres attended, and which had helped build a shared understanding of the upcoming challenges in the COVID-19 response. The ERC highlighted the ongoing advocacy for a stronger international response for the poorest countries, as outlined in OCHA's paper, “The cost of doing nothing: the price of inaction in response to the COVID-19 crisis”, which had been circulated to the Principals. The ERC welcomed further thoughts on this analysis and suggestions for future dedicated sessions in follow up.

The ERC updated the Principals that as of 9 July, the Global Humanitarian Response Plan (GHRP) was funded at US$1.64 billion, an incremental increase to 22 per cent of the total $7.48 billion. While the overall global funding for humanitarian action was higher than the same time last year, it was important to emphasize to donors that the current challenges were far greater; as such, donor support to close the funding gap was crucial.

The ERC expressed his appreciation for the efforts of IASC members and partners who were contributing to the preparation of the revised GHRP, which would be seeking approximately $10 billion in funding. Most field offices had requested moderate increases, largely due to increasing concerns about food insecurity, protection of civilians, and ongoing health needs. While no additional countries had been added to the GHRP, the humanitarian component of existing plans (such as, regional refugee plans, regional migration plans or joint response plans) had been built into the GHRP, including the associated support to host communities. The revision included a supplementary unallocated funding envelope of $300 million for NGOs beyond country level requirements. A strategic famine prevention envelope of $500 million was also included. The draft GHRP is currently with the EDG for final review.

The first monthly progress report for the GHRP had been shared at the beginning of the month, replacing the biweekly GHRP highlights. However, the ERC reiterated the need to better report on impact and results and to report through the Financial Tracking System (FTS) to support advocacy efforts with donors for increased funding.
**Health Update**

Dr. Ibrahima Socé Fall, WHO Assistant Director-General for Emergency Response updated the Principals on developments in the COVID-19 outbreak. The number of cases worldwide had now reached 12 million and 544,000 deaths. On average, 200,000 new cases were being reported to WHO on a daily basis and over a million cases in each of the last three weeks. The doubling time in many countries continued to accelerate, including in low resource settings.

Infections continued to rise fastest in low to middle income countries across Latin America, the Middle East, South Asia and Africa. The US had now reached more than 60,000 cases a day. The United States, India and Brazil remained the three most affected countries in recent days. In addition, South Africa, the Russian Federation, Mexico, Saudi Arabia, Colombia, Bangladesh and Peru continued to be heavily affected. The situation remained very alarming. The number of new deaths seemed to be plateauing globally, however, given the stark rise in overall infections, this was likely to change over the coming weeks.

WHO was concerned for countries with weak health systems, where it was a challenge to detect and treat illnesses without exposing patients to COVID-19. This was a particular concern in many parts of Africa as the season for malaria transmission was approaching. Through the global health cluster, and as reported on the WHO partners portal (https://covid-19-response.org), WHO provided an additional 3,000 oxygen concentrators, including to Yemen, Iraq, Bangladesh and Burkina Faso. WHO was also working to address PPE gaps in Libya. WHO was working with health partners on planning and capacity building in priority areas, such as case management, infection prevention and control, risk communication and community engagement, with a specific focus on non-communicable disease, as part of essential health services delivery.

Dr. Fall updated the Principals that the WHO Director-General had announced the initiation of the Independent Panel for Pandemic Preparedness and Response (IPPR) to evaluate the world’s response to the COVID-19 pandemic, which would be co-chaired by the former Prime Minister of New Zealand, Helen Clark and the former President of Liberia, Ellen Johnson Sirleaf.

**Update on Logistics**

Ms. Valerie Guarnieri, Assistant Executive Director of WFP, informed the Principals that aviation and passenger services were now reaching 46 destinations and transporting approximately 1,000 passengers each week, of which 52 per cent were NGO partners. The approach was to discontinue routes as commercial options became available. More than 27,000 cubic meters of cargo had been transported to over 140 countries. There had been some delays, notably in the import and export of health-related items, but in general the process was moving well. The field hospitals in Accra, Ghana and in Addis Ababa, Ethiopia had been constructed and WFP was actively handing them over to WHO and partners. Medical Evacuation operations were running well. Overall, however, funding remained a significant constraint. Only $200 million of the requested $965 million for common services had been received and, therefore, the continuity of these essential operations remained at risk.
Discussion

InterAction shared the preliminary findings of their survey on NGO Funding and Flexibility During COVID-19, which had been circulated to the Principals. The survey captured a snapshot in mid-June and formed part of InterAction’s efforts to better understand how NGOs were responding to the COVID-19 crisis, the degree to which donor and UN agency policies and funding were impacting NGO country responses, and how NGOs were adapting in light of the global response.

Of respondents surveyed, less than half reported their organizations had received new funding for COVID-19 response and most of those new awards were for less than $1 million across their country programmes, which indicated that funding was not yet flowing to NGOs at that time. Of a ranking of government donors and UN agencies, the UN appeared to be the most flexible in terms of allocation of funds, demonstrating the impact of the efforts of the heads of UN Agencies in this forum. In terms of speed, the analysis showed that approximately 45 per cent of requests to the European Union had received a response in under two weeks, and 60 per cent of requests to the UN had received a response in under one month. However, over 60 per cent of requests to the US were still pending a response.

ICVA highlighted that funding to NGOs still needed to be stepped-up and better tracked, including at the global level with greater discipline in reporting on FTS. Equally as important, ICVA requested further clarification regarding the modality that would be used to allocate the $300 million funding envelope in the GHRP for NGOs. Similarly, ICVA asked for confirmation of whether the target of 15 per cent of humanitarian response plan (HRP) funding being channeled through country-based pooled funds (CBPF) was still valid.

CRS and ICVA expressed their appreciation for all efforts made by WFP around common services, noting that they have brought significant value to NGOs operating in the frontlines. They noted that there were a number of areas of concerned expressed by NGOs, which they would discuss bilaterally with WFP, including a lack of clarity on the global guidance; standard operating procedures; and roles and responsibilities, as well as questions around scale and sustainability.

CRS called for greater attention to the needs of local groups, such as indigenous populations and the various faith-based groups to ensure that they were receiving the supplies they needed to support their communities. IFRC echoed this call and stated that the response needed to go beyond capital cities and reach the local level. OHCHR had recently issued a note on the “Impact of COVID-19 on Indigenous People’s Rights”, and how to include those groups in response and preparedness. OHCHR had also issued earlier guidance on racial discrimination in general.

IFRC flagged the ongoing challenges faced by humanitarian actors in conducting COVID-19 response operations in the West Bank. Following the cessation of the coordination between Palestine and Israel, import of PPE and medical equipment, for example, had become near impossible.
UNICEF expressed appreciation to WHO for the development of technical guidance notes, and, noting the wide differences in the way that countries were approaching testing, isolation, tracking and tracing, underscored that it was important to keep sharing good practices. UNICEF also reported a worrying decrease in the number of immunization campaigns and general public health and nutrition services. In Cameroon, WHO had reported a 95 per cent reduction in services, while in Sierra Leone, Concern Worldwide had identified a decline of 30 per cent in the health services from March to April this year.

UNICEF proposed a future dedicated discussion among the IASC Principals on safe and clean water and sanitation. UN-Habitat echoed this suggestion; it would be a helpful way to look at cross-cutting issues affecting the COVID-19 response and a number of other emergencies.

UNICEF, InterAction, SCHR, Concern Worldwide and UNDP welcomed OCHA’s draft “price of inaction” paper and UNICEF proposed that each organization supplement it with an analysis from their own respective areas of responsibility.

The World Bank noted that as of the end of June, the total amount of support to countries affected by COVID-19 was slightly more than during the global 2008 to 2009 financial crisis, which demonstrated the scale of this challenge. In the last week, the Board of the World Bank Group discussed the updated framework for COVID-19 response, which emphasized a resilient recovery phase. The ERC welcomed this initiative and said that to maximize the potential of building back better, the first step was to limit the impact of the upcoming phase of acute humanitarian needs was

ICVA welcomed the decision by the IASC’s Operational Policy and Advocacy Group (OPAG) on the broader issues of duty of care. ICVA especially welcomed the establishment of a task force, led by WFP and ICVA, and its work to build upon the 14 actions presented by ICVA to the IASC Principals, including how they might be resourced. SCHR said that it was particularly important to advocate for support to national NGOs.

IOM informed the Principals that the organization was expecting to conclude the First Line of Defence agreement in the coming days to provide support to UN staff. IOM also indicated that the organization was under great pressure to put in place the necessary testing measures, which would give greater assurances to the staff on the front line.

Oxfam had recently published a paper, “The Hunger Virus: how COVID-19 is fueling hunger in a hungry world”, which highlighted that deaths from hunger were likely to exceed those from COVID-19. UNICEF reported that wasting would increase by at least 15 per cent this year, indicating severe acute malnutrition. UNHCR highlighted serious concerns about food shortages in multiple refugee contexts in Africa, such as Ethiopia, Cameroon and in Uganda. These were areas where it was not easy to substitute food

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1 The “First Line of Defence” is a proposal to put in place a network of high-quality, reliable health professionals and services for UN staff based in lower-income settings and duty stations for COVID-19 and other health needs to minimize the need for health evacuations of UN workers.
distributions with cash operations. UNCHR and WFP had issued a joint press release in this regard.

SCHR, ICVA, Concern Worldwide and IFRC expressed appreciation to the ERC for the inclusive process characterizing the preparation of the revised GHRP. IOM emphasized the importance of visibility for the situation of stranded migrants, who were not receiving food, water, nor minimum health care; and were subject to movement restrictions and discrimination on their return to countries of origin.

UNHCR noted that several partners had also asked for increased visibility in the GHRP of protection issues, such as sexual and gender-based violence (SGBV). SCHR expressed the concern that if SGBV was not a standalone objective in the GHRP, it would not get the investment it needed. UNFPA noted opportunity for increased advocacy, given the large amounts of data obtained during the process of developing the GHRP and indicated an interest in further discussion on how this agenda could be prioritized at the field level. UN-Habitat highlighted the worrying increases in reports of SGBV in informal settlements and slums, which would be reflected in the SG’s Policy Brief on COVID-19 and Cities, to be published on 21 July. The Policy Brief contained interesting markers for migration, refugees, IDPs and the avoidance of further humanitarian deterioration in cities.

OHCHR supported the points raised on protection. In her global update at the 44th session of the Human Rights Council, the High Commissioner for Human Rights had brought to the attention of Member States the multi-dimensional harms of COVID-19 in fragile situations. She had reiterated her support for the easing or suspension of sanctions and noted the human rights and humanitarian situations in Yemen, Syria, South Sudan, Sahel, Haiti and Zimbabwe.

UNDP noted that protection was also a priority issue in the social and economic response and that there were opportunities to strengthen alignment with the GHRP. UNDP also thanked WFP and UNICEF for adhering to the Development Assistance Committee (DAC) recommendation on the Humanitarian-Development-Peace Nexus.

The ERC thanked UNFPA, UNICEF and others and agreed that protection activities were not being met with sufficient funding, an issue which needed to be discussed with the donors.

Any other business

At the request of the ERC, UNHCR highlighted internal efforts to address issues around discrimination and multi-cultural relationships and proposed a discussion among IASC members, building on the successes of similar initiatives on sexual exploitation and abuse. UNICEF, IFRC, SCHR, Concern Worldwide, CRS, SCHR, InterAction, and others, expressed their support for the suggestion. Many of the members had already initiated internal discussions, including UNICEF, which had established a task team and Interaction, where the discussion on diversity, equity and inclusion had been taken up among the consortia’s CEOs. OHCHR also noted the effort of the UN Secretary-General to develop a one-year plan. The ERC asked the IASC secretariat to explore which IASC fora
might be best placed to continue a cross-system discussion and, as UNICEF suggested, bring together internal task teams to generate ideas to support IASC members in tackling this important issue.

**Follow-up actions:**

1. Collectively reflect, as the IASC, on recent discussions around racism and discrimination in aid, ensuring lesson learning across IASC organizations and suggesting a collective IASC approach to addressing these concerns. [Action: OPAG with the support of the IASC secretariat, to share with IASC Deputies]
2. Step up and prioritize advocacy for funding of common services in engagements with donors. [Action: IASC Members]
3. Explore the opportunity for a dedicated discussion on issues around clean water and sanitation in the COVID-19 response. [Action: IASC Secretariat to follow-up with UNICEF]
4. Build on the findings of the survey shared by InterAction regarding support to local actors, including in terms of supplies and resourcing (as well as the further use of CBPFs). [Action: OCHA and UN partners]
5. Bring together donors concerned with SGBV to ascertain why programmes addressing SGBV are not being prioritized in funding, despite verbal support and agreement. [Action: ERC in collaboration with the concerned Principals]
6. Explore what more could feasibly be achieved to protect national NGO staff working on the front lines. [Action: Deputy Emergency Relief Coordinator]
7. Organise a practical discussion with NGO representatives and WFP to elicit recommendations to improve the operation of the MedEvac system for NGOs [Action: WFP and Deputy Emergency Relief Coordinator]
8. Strengthen duty of care support to humanitarian actors on the ground and ensure more pronounced engagement of IASC members on duty of care issues. [Action: ICVA and WFP as co-chairs of the OPAG’s sub-group on duty of care]
9. As regards to the GHRP:
   - Strengthen the language of the GHRP text as regards the needs of stranded migrants. [Action: OCHA in collaboration with IOM]
   - Step-up and better track funding to NGOs; clarify the modalities of the new funding envelope for NGOs in the revised GHRP. [Action: OCHA]
   - Amplify the resource mobilization messages following the launch of the GHRP on 16 July. [Action: IASC Principals]

The next IASC meeting will include the food security agenda item to be presented by FAO and WFP.
List of participants:

1. Mr. Mark Lowcock, Emergency Relief Coordinator, OCHA
2. Dr. Ibrahima Socé Fall, Assistant Director-General for Emergency Response, WHO
3. Mr. Xavier Castellanos Under Secretary-General, IFRC
4. Ms. Henrietta Fore, Executive Director, UNICEF
5. Ms. Filippo Grande, High Commissioner, UNHCR
6. Ms. Cecilia Jimenez-Damary, Special Rapporteur on the human rights of IDPs
7. Mr. António Vitorino, Director General, IOM
8. Mr. Sean Callahan, President and CEO, CRS
9. Ms. Maria Immonen, Vice-Chair of SCHR (Director, Lutheran World Federation)
10. Mr. Dominic MacSorley, CEO, Concern Worldwide
11. Ms. Abby Maxman, Chair of SCHR (President and CEO, Oxfam America)
12. Mr. Ignacio Packer, Executive Director, ICVA
13. Mr. Gareth Price, Executive Secretary, SCHR
14. Mr. Sam Worthington, CEO, InterAction
15. Mr. Roger Yates, Chair, ICVA (Regional Director, Plan International)
16. Ms. Valerie Guarnieri, Assistant Executive Director, WFP
17. Ms. Nada Al-Nashif, Deputy High Commissioner, OHCHR
18. Mr. Robert Piper, Assistant Secretary General, DCO
19. Mr. Ramesh Rajasingham, Assistant Secretary General, OCHA
20. Ms. Asako Okai, Assistant Administrator, UNDP
21. Ms. Shoko Arakaki, Director Humanitarian Office, UNFPA
22. Ms. Christine Knudsen, Director of Emergencies, UN-Habitat
23. Mr. Toomas Palu, Adviser, World Bank