DSAI HUMANITARIAN ACTION STUDY GROUP
Humanitarian
Research Learning
Series

LEVERAGING RESEARCH AND EVIDENCE FOR HUMANITARIAN RESPONSE DURING COVID-19

SOURCES

This mapping draws on the contributions of expert speakers to a webinar held on the 8th of May in partnership with the Irish Global Health Network and ESTHER Alliance for Global Health Partnerships. Visit their weekly webinar series here.

We are grateful to the speakers for their contributions:

- Ruairi Brugha, Professor Emeritus, Royal College of Surgeons in Ireland;
- Niall Roche, Consultant in Environmental Health:
- Gul Wali Khan, CEO, Prepared, Pakistan;
- Amy Folan, Senior Education Advisor, Concern Worldwide;
- Ben Heaven Taylor, CEO, Evidence Aid.

The mapping also draws on responses to a survey shared by DSAI in April 2020.

Respondents represented a combination of humanitarian researchers and practitioners, some directly involved in COVID-19 response and research, and others responding to and researching humanitarian needs in the wider context of COVID-19. Thank you to all who responded.

For more information and updates on DSAI events, please visit <u>dsaireland.org</u>.

BACKGROUND AND RATIONALE

Against the backdrop of an unprecedented global pandemic, DSAI's Humanitarian Action Study Group has sought to conduct a rapid mapping of evidence and knowledge gaps among humanitarian responders, and key global and public health research priorities for humanitarian response. Our objective is to identify preliminary priority areas for collecting data and evidence, applying learning, and addressing research gaps in order to support effective, coordinated action across humanitarian research and practice.

Ultimately, the mapping aims to make an initial contribution to addressing the following questions:

- What are the knowledge and evidence gaps that humanitarian actors need to fill urgently to respond effectively to, and in the context of, COVID-19?
- What existing research and practical expertise from past global health crises can be leveraged to improve response and support prevention? and
- How can operational organisations design humanitarian responses that integrate public health research priorities from the outset?

Results are drawn from a small sample and reflect preliminary priorities at an early stage of response. They are are therefore neither definitive nor exhaustive. Suggested resources are drawn from those shared by survey respondents, or those who took part in the webinar, highlighting specific examples and guidance which readers may find useful, but these too, are necessarily incomplete and represent only a fraction of material being produced and updated at this time.

However, we hope this mapping makes a useful contribution to identifying potential research priority areas, while pointing to the potential for partnerships between researchers and humanitarian practitioners seeking to develop an effective, coordinated response.







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Evidence Aid's Coronavirus (COVID-19) Evidence Collection, online <u>here</u>. Ongoing updates.

Groupe URD, Epidemics, Pandemics and Humanitarian Challenges: Lessons from a Number of Health Crises (En and Fr versions), online here. March 2020.

Imperial College - COVID-19
Response Team, Report 19:
The Potential Impact of the
COVID-19 Epidemic on HIV,
TB and Malaria in Low and
Middle-Income Countries,
online here. May 2020.

'What we need to be paying attention to is the poor, the displaced and ethnic minorities, who are hit hardest by the virus, and hit hardest by the responses [...] We need to better understand their vulnerabilities.'

- Prof Ruairi Brugha

HEALTH IMPACTS OF COVID-19

Given the unprecedented scale and nature of the current crisis, gaps in data, learning and knowledge directly related to COVID-19 and its impacts were highlighted by many respondents and speakers.

Gaps in knowledge highlighted in the survey included:

- The anticipated prevalence and duration of COVID-19 in humanitarian contexts, given uncertainties around how the disease will develop and how it will differentially affect vulnerable populations;
- The most effective means of slowing the spread of the virus, which are practical and achievable in the context of the limited state capacity, and/or conflict, that characterise many humanitarian contexts; and
- An understanding of community knowledge, attitudes and practices (KAPs) in the context of COVID-19, and the acceptance and uptake of public health messaging in humanitarian contexts.

The webinar discussion drew attention to several obstacles in the current humanitarian system that make response more challenging. From a technical standpoint, these include a tendency to focus on biomedical responses such as vaccination, over responses that prioritise prevention measures. WASH interventions and behaviour change, as highlighted by Niall Roche, drawing on past experience with cholera and TB response. The impact of household air pollution in exacerbating vulnerability to the virus was highlighted as as particular evidence gap requiring further research; alongside the impact of COVID-19 on co-morbidities and existing health crises, including HIV and AIDS, malaria and TB, as highlighted by Ruairi Brugha and Ben Heaven Taylor; and non-communicable diseases such as acute respiratory infections and pneumonia, in particular.

Operationally, key knowledge gaps highlighted by Gul Wali Khan included how to design effective response strategies in a context of limited access, and ways of overcoming the unique challenges faced by local and national NGOs that have limited access to international funding, in spite of broad commitments to localisation.

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LSE Blog, Why a One-Size Fits All Approach to COVID-19 Could Have Lethal Consequences, online here. March 2020.

International Rescue Committee, COVID-19 in Humanitarian Crisis: A Double Emergency, online here. April 2020.

Oxfam, Community Engagement during COVID-19: 13 Practical Tips, online here. March 2020.

'We know that education is a key factor in addressing many health indicators, gender equality, conflict... It's all very inter-related, so if we don't act to address some of the gaps in learning needs now, we're going to see those rippling effects for generations.'

- Amy Folan

INDIRECT, SECONDARY IMPACTS

Beyond the direct, health impacts of COVID-19 in humanitarian contexts, many respondents and speakers raised evidence and knowledge gaps related to indirect and secondary impacts of both the virus itself, and the nature of control measures implemented in response.

Priority areas identified for further data collection, research and learning included:

- The gendered dimensions of COVID-19, both in terms of direct response measures reaching and affecting women, men, girls and boys differently; but also the second-order gendered experiences of impacts on food security, livelihoods, and mobility;
- Given data on gender-based violence can be challenging to gather robustly in any context, particular concerns were raised regarding the unknown impact of COVID-19 and related control measures on protection threats to women in particular, alongside children out of school; and
- The impact of COVID-19 and control measures on livelihoods, food security and mobility in the face of the crisis.

Amy Folan spoke to the magnitude of the impact of disruption to education, with an estimated 1.6billion children out of school across the world. Given pronounced gaps in emergency education evidence to begin with, particular emphasis was placed on the need for strategies for maintaining learning outcomes in low-resource contexts. Drawing on lessons from Ebola response, Amy Folan highlighted the need for an understanding of the gendered risks girls and young women face when out of school.

Survey responses highlighted specific programme design priorities related to meaningful community engagement and knowledge gaps concerning how to support effective community-led response in contexts of limited staff mobility and access. Gul Wali Khan also highlighted the disconnect between grassroots CSOs and wider humanitarian efforts, and the need for approaches to build on and strengthen local responses.

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CartONG, COVID-19: How to Adapt Your Data Collection for Monitoring and Accountability, online here. April 2020.

ALNAP, Responding to COVID-19: Guidance for Humanitarian Agencies, online here, April 2020.

Search for Common Ground and World Vision, Policy Brief: COVID-19 and Conflict Sensitivity, online here. May 2020.

'[In the early stages of Ebola response] As a humanitarian sector, I don't think we had the skills or the understanding to understand the existing evidence base [...] Understanding the critical role of research and evidence early on, particularly in infectious disease outbreaks is really, really important.'

- Ben Heaven Taylor

EVIDENCE, LEARNING & ADVOCACY

Operationally, the task of gathering data and evidence to inform research and learning itself was raised as a priority focus area by several respondents. One respondent focused on the need for guidance on 'How and when realtime evaluations should be carried out in humanitarian organisations, how to coordinate those for maximum impact within and across organisations and sectors.' Others emphasised the importance of identifying good practice in carrying out baselines against which performance can be measured, and developing and sharing resources example metrics and performance indicators in the context of COVID-19.

Ben Heaven Taylor drew attention to the importance of available evidence in infectious disease response. He emphasised the strong evidence base that exists on many issues, and the need to make this evidence accessible and useful to decision-makers. Beyond immediate response, the speaker emphasised the value of looking to the recovery and post-recovery phase, and 'building back better.' This can be done by supporting the development of resilient public health systems in which data and evidence feature more centrally.

Lastly, in considering the wider context of humanitarian response, survey contributions highlighted several concerns for which more robust research and a stronger evidence base would be valuable. These included:

- Evidence and learning on the relationship between conflict and COVID-19, given the scale of conflict-driven humanitarian crises:
- Research to inform advocacy around policy action on global ceasefires and local peacebuilding in the current crisis; and
- Monitoring and analysis of funding and financial decisions by donors and governments and how resources are prioritised within and across vulnerable groups and government sectors.





